PAGE 1 / 224

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only
NAME OF TOMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
America PAC			
ADDRESS (number and street)	P.O. BOX 341027		
Check if different than previously reported. (ACC)	AUSTIN		TX 78734 -
2. FEC IDENTIFICATION NUM	MBER ▼ CITY	′ ▲	STATE ▲ ZIP CODE ▲
C C00879510	3. IS	THIS X NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report	20 (M2) May 20 (M	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M6	(Non-Election Year Only)
April 15 Quarterly Report (Q1		Primary (12P)	Oct 20 (M10) Jan 31 (YE) X General (12G) Runoff (12R)
July 15 Quarterly Report (Q2 October 15	PRE-Election Report for the:	Convention (12C)	Special (12S)
Quarterly Report (Q3 January 31	Floation	M M / D D	in the State of
Year-End Report (YE July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Report for the: Election	on/	in the State of
5. Covering Period 10	01 / 2024	through 10	M / 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined this Type or Print Name of Treasurer	Report and to the best of r YOUNG, CHRIS, , ,	my knowledge and belief it is	true, correct and complete.
Signature of Treasurer YOUNG	G, CHRIS, , ,		Date 10 / 24 / 2024
NOTE: Submission of false, erronec	ous, or incomplete information	may subject the person signing	g this Report to the penalties of 52 U.S.C. § 30109.
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name America PAC 10 2024 16 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1. 0 (b) Cash on Hand at 3998639.05 Beginning of Reporting Period..... 46600000.00 130300020.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 50598639.05 130300020.00 6(a) and 6(c) for Column B)..... 126976908.37 47275527.42 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 3323111.63 3323111.63 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3 Write or Type Committee Name America PAC 01 10 2024 16 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 46600000.00 130300000.00 (i) Itemized (use Schedule A)..... 0.00 20.00 (ii) Unitemized (iii) TOTAL (add 130300020.00 46600000.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 46600000.00 130300020.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 130300020.00 12, 13, 14, 15, 16, 17, and 18(c))....... 46600000.00 20. Total Federal Receipts 46600000.00 130300020.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal		valoridati todi to buto		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	2072520 40	0500005.07		
Expenditures(c) Total Operating Expenditures	2379508.48	8506695.87		
(add 21(a)(i), (a)(ii), and (b))▶	2379508.48	8506695.87		
2. Transfers to Affiliated/Other Party	0.00	0.00		
Committees Contributions to Federal Candidates/Committees	0.00	0.00		
and Other Political Committees	0.00	0.00		
Independent Expenditures (use Schedule E)	44896018.94	118470212.50		
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4	1.5.1.52.12.100		
(use Schedule F)	0.00	0.00		
. Loan Repayments Made	0.00	0.00		
		4 4 4		
Loans Made Refunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(h) Delitical Berty Court	7 7	4 4 4		
(b) Political Party Committees (c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	0.00	0.00		
Federal Election Activity (52 U.S.C. § 30101(2	20))			
(a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	200	0.00		
(c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	47275527.42	126976908.37		
	71210021.72	12301 3000.01		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	47275527.42	126976908.37		
•	4	12031 0300.31		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	46600000.00	130300020.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46600000.00	130300020.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2379508.48	8506695.87
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	2379508.48	8506695.87

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

224 FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt MUSK, ELON, , , Mailing Address 2110 RANCH ROAD 620 S. #341886 04 2024 10 City Zip Code Transaction ID: SA11A.29 **AUSTIN** TX 78734-0277 Amount of Each Receipt this Period FEC ID number of contributing 11000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SPACE EXPLORATION TECHNOLOGIES CORP. CEO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 118550000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PELTZ, NELSON, , , Date of Receipt Mailing Address 548 N. COUNTY ROAD 10 04 2024 City State Zip Code Transaction ID: SA11A.30 FL PALM BEACH 33480-3507 Amount of Each Receipt this Period FEC ID number of contributing 1000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **EXECUTIVE** TRIAN FUND MANAGEMENT L.P. CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. DEVOS, BETSY, , , Date of Receipt Mailing Address 1170 FOX HOLLOW 07 2024 10 City State Zip Code Transaction ID: SA11A.33 MI **ADA** 49301-7402 Amount of Each Receipt this Period FEC ID number of contributing C 250000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **SELF** PHILANTHROPIST, POLITICAL ACTIVI CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250000.00 Other (specify) 12250000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

mage# 202410249719229543			
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 224 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) America PAC	and a	adress of any political committee	e to solicit contributions from such committee.
Full Name of Individual (Last, First, Middle In A. DEVOS, DANIEL, , ,	itial) or Full O	rganization Name	Date of Receipt
Mailing Address 126 OTTAWA AVENUE			10 07 2024
City GRAND RAPIDS	State MI	Zip Code 49503-2829	Transaction ID : SA11A.36 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250000.00
Name of Employer (for Individual) DP FOX VENTURES, LLC	Occu	upation (for Individual)	Memo Item CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250000.00	
Full Name of Individual (Last, First, Middle In DEVOS, DOUG, , , Mailing Address 126 OTTOWA AVENUE	itial) or Full O		Date of Receipt 10 07 2024
City GRAND RAPIDS	State MI	Zip Code 49503-2829	Transaction ID : SA11A.34 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250000.00
Name of Employer (for Individual) AMWAY		upation (for Individual) CHAIRMAN	Memo Item CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250000.00	CONTRIBUTION
Full Name of Individual (Last, First, Middle In DEVOS, MARIA, , ,	itial) or Full O	rganization Name	Date of Receipt
Mailing Address 126 OTTAWA AVENUE			10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GRAND RAPIDS	State MI	Zip Code 49503-2829	Transaction ID : SA11A.35 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250000.00
Name of Employer (for Individual) SELF		upation (for Individual) ANTHROPIC LEADER	Memo Item CONTRIBUTION
Receipt For: Primary General	Aggregate	Year-to-Date ▼	-

250000.00

750000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** (check only one) X 11a 11b 11c

224 8 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) America PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt DEVOS, PAM, , , Mailing Address 126 OTTAWA AVENUE 2024 07 10 City Zip Code State Transaction ID: SA11A.37 **GRAND RAPIDS** MI 49503-2829 Amount of Each Receipt this Period FEC ID number of contributing C 250000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) DP FOX VENTURES, LLC **CO-FOUNDER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DEVOS, RICHARD, M., , Date of Receipt Mailing Address 1170 FOX HOLLOWSE 10 07 2024 City State Zip Code Transaction ID: SA11A.32 ADA MI 49301-Amount of Each Receipt this Period FEC ID number of contributing 250000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **ENTREPRENEUR SELF** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DEVOS, SUZANNE, C., , Date of Receipt Mailing Address 126 OTTAWA AVENUE 07 2024 10 City State Zip Code Transaction ID: SA11A.31 MI **GRAND RAPIDS** 49503-2829 Amount of Each Receipt this Period FEC ID number of contributing C 500000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BATON COLLECTIVE FOUNDER/OWNER CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 500000.00 Other (specify) 1000000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Mailing Address 2110 RANCH ROAD 620 S. #341886

City

AUSTIN

FEC ID number of contributing

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 224
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12
		, ,	13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
America PAC			
Full Name of Individual (Last, First, Middle Init	ial) or Full Org	anization Name	
A. MUSK, ELON, , ,	,		Date of Receipt
Mailing Address 2110 RANCH ROAD 620 S. #3	841886		M M / D D / Y Y Y Y
2110101110110110110110110110110110110110	J-1000		10 09 2024
City	State	Zip Code	Transaction ID : SA11A.38
AUSTIN	TX	78734-0277	Amount of Each Receipt this Period
FEC ID number of contributing			40000000 00
federal political committee.	C		1000000.00
Name of Employer (for Individual)	Occur	vation (for Individual)	Memo Item
, , ,		alion (ioi maividual)	Wieno item
SPACE EXPLORATION TECHNOLOGIES COR	RP. CEO		CONTRIBUTION
Receipt For:	Aggregate Y	ear-to-Date ▼	
Primary General		440550000.00	1
Other (specify) ▼		118550000.00	
Full Name of Individual (Last, First, Middle Init	ial) or Full Org	anization Name	
B. MUSK, ELON, , ,			Date of Receipt

federal political committee.	C .		790000.00
Name of Employer (for Individual) SPACE EXPLORATION TECHNOLOGIES		tion (for Individual)	Memo Item CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 118550000.00	
Full Name of Individual (Last, First, Middle C. MUSK, ELON, , ,		nization Name	Date of Receipt
Mailing Address 2110 RANCH ROAD 620 : City	S. #341886 State	Zip Code	10 15 2024 Transaction ID : SA11A.40
AUSTIN	TX	78734-0277	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		14700000.00
Name of Employer (for Individual) SPACE EXPLORATION TECHNOLOGIES		ion (for Individual)	Memo Item CONTRIBUTION
Receipt For: Primary General Other (specify)	Aggregate Yea	r-to-Date ▼ 118550000.00	
SUPTOTAL of Possints This Page (entire)			32600000.00

Zip Code

78734-0277

State

ΤX

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

46600000.00

2024

7900000.00

10

11

Amount of Each Receipt this Period

Transaction ID: SA11A.39

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check or			E NUMBER: PAGE 10 OF 224 nly one)		
		category of the Summary Page	X 21b 28a	22 23 28b 28c	26 27 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,				
America PAC						
Full Name (Last, First, Middle Initial)				Data of Diahuman		
^{A.} CHAIN BRIDGE BANK				Date of Disburser		
Mailing Address 1390 CHAIN BRIDGE RD STE 515				10 01		
,	tate	Zip Code		FEC Identification	Number	
MCLEAN Purpose of Disbursement	VA	22101				
BANK FEE				C		
Candidate Name				Transaction I	_	
Candidate Name			Category/ Type	Amount of Each I	Disbursement this Period	
Office Sought: House Disbursem	ent For:		туре		287.50	
	Primary	General		7	7 7	
	Other (spec	ify) ▼		Memo Item		
State: District:						
Full Name (Last, First, Middle Initial)						
^{B.} FULL REACH MEDIA GROUP LLO				Date of Disburser	nent	
Mailing Address DO DOV 121552		M M / D				
Mailing Address PO BOX 101552		I		10 01	2024	
,	tate VA	Zip Code 22210		FEC Identification	Number	
Purpose of Disbursement	<u> </u>	22210		С		
DIGITAL MEDIA CONSULTING						
Candidate Name	Category/	Transaction ID : SB.18 Amount of Each Disbursement this Pe				
			Type	Amount of Lacif t	Disbursement this renou	
Office Sought: House Disbursem	ent For:	l		1	45500.00	
Senate	Primary	General				
	Other (spec	ify)		Memo Item		
State: District:						
Full Name (Last, First, Middle Initial)				Data of District	mont	
^{C.} THE TARRANCE GROUP LLC				Date of Disburser		
Mailing Address 201 N UNION STREET, SUITE 310	<u> </u>			10 01		
Maining Address 2011 ONION STREET, SUITE STO	•			.,		
City	tate	Zip Code		FEC Identification	Number	
71=270 1112 111111	VA	22314		i Lo identification	TAULIDEL	
Purpose of Disbursement				C		
SURVEY RESEARCH						
Candidate Name			Category/ Type	Amount of Each I	Disbursement this Period	
Office Sought: House Disbursem	ent For:		туре		44958.00	
	Primary	General		4	4	
	Other (spec			Memo Item		
State: District:				iviemo item		
SUBTOTAL of Disbursements This Page (optional)					90745.50	
				7	4 1 1 1 1	
TOTAL This Period (last page this line number only).				1		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check of for each category of the		FOR LINE (check only		
	Detailed	Summary Page	28a	28b 28c 29 30b	
Any information copied from such Reports and Staten or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)		, pointo			
America PAC					
Full Name (Last, First, Middle Initial)		Date of Disbursement			
PIERCE, ANN, , ,				M M / D D / Y Y Y Y	
Mailing Address 167 OLD CORINTH ROAD				10 04 2024	
City NEWNAN	State GA	Zip Code 30263		FEC Identification Number	
NEWNAN Purpose of Disbursement	<u></u>	30203			
POLITICAL STRATEGY CONSULTING				C	
Candidate Name				Transaction ID : SB.26	
			Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disburser	nent For:		туре	10000.00	
Senate Disburser	Primary	General			
President	Other (spec			D Marrie Bar	
State: District:	(٥ρ٥١	<i>3,</i> ₹		Memo Item	
Full Name (Last, First, Middle Initial)					
D				Date of Disbursement	
B. ARENA MAIL & DIGITAL				M M / D D / Y Y Y Y	
Mailing Address 1260 E STRINGHAM AVE SUITE	400			10 04 2024	
,	State	Zip Code		FEC Identification Number	
SALT LAKE CITY	UT	84106			
Purpose of Disbursement				C	
PRINTING Candidate Name				Transaction ID : SB.32	
Candidate Natife			Category/	Amount of Each Disbursement this Period	
Office Sought: Haves	Office Sought: House Disbursement For:				
		Gonoral		2787.00	
	remain				
State: District:	omer (spec	Oil y /		Memo Item	
Full Name (Last, First, Middle Initial)				Date of Disbursement	
CHAIN BRIDGE BANK					
Mailing Address 1390 CHAIN BRIDGE RD STE 515	5			10 04 7 2024	
City	State	Zip Code		FEC Identification Number	
MCLEAN	VA	22101		I LO IGENINGANON NUMBE	
Purpose of Disbursement				C	
BANK FEE			<u> </u>	Transaction ID : SB.2	
Candidate Name	Category/	Amount of Each Disbursement this Period			
			Type	2222	
Office Sought: House Disburser				510.00	
Senate	Primary	General			
President	Other (spec	city) 🔻		Memo Item	
State: District:				_	
SUBTOTAL of Disbursements This Page (optional)			>	13297.00	
TOTAL This Period (last page this line number only)	١		·····		

17

SCHEDULE B (FEC Form 3X)	11		FOR LINE	FOR LINE NUMBER: PAGE 12 OF 2				
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check on					
		Summary Page	X 21b		23 28c	26 27 29 30b		
Any information copied from such Departs and Chite-	onte mau -	not he cold or						
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)								
America PAC								
/								
Full Name (Last, First, Middle Initial) A. DERIVE TECHNIQUES LLC				Date o	f Disbursen	nent		
A. DERIVE TECHNOLOGIES LLC				M M	/			
Mailing Address PO BOX 1651	Mailing Address PO BOX 1651					2024		
		T						
,	state WI	Zip Code 53701		FEC Id	entification	Number		
Purpose of Disbursement		33701		С				
POLITICAL STRATEGY CONSULTING					ansaction I	D . CD 27		
Candidate Name			Category/			Disbursement this Period		
			Type			00000.00		
Office Sought: House Disbursem		0.00000			-	20000.00		
	Primary Other (spec	General						
State: District:	Other (open	,y) ▼		Me	mo Item			
Full Name (Last, First, Middle Initial)								
B. IMGE LLC				Date o	f Disbursen	nent		
<u> </u>				M = M	/ D D			
Mailing Address 1401 H STREET NW SUITE 550				10	04	2024		
City	state	Zip Code				N		
•	DC	20005		FEC IO	entification	Number		
Purpose of Disbursement								
WEBSITE DEVELOPMENT/MANAGEMENT/WEB : Candidate Name	SERVICE			Tra	nsaction II	D : SB.55		
Candidate Name			Category/ Type	Amoun	t of Each D	Disbursement this Period		
Office Sought: House Disbursem	nent For:		туре	1		527162.17		
	Primary	General			7	4 4		
President	Other (spec	cify)		│	mo Item			
State: District:				Ц				
Full Name (Last, First, Middle Initial)				Data	f Diabumaan			
^{C.} P2 PATHWAY PUBLIC AFFAIRS L	LC				f Disbursen			
Mailing Address 1401 H ST NW STE 550				10	04			
,	state DC	Zip Code		FEC Id	entification	Number		
WASHINGTON Purpose of Disbursement	DC	20005						
POLITICAL STRATEGY CONSULTING				C	ansaction I	D · SR 24		
Candidate Name			Category/			Disbursement this Period		
			Type			20000.00		
Office Sought: House Disbursem		Consust				30000.00		
	Primary Other (spec	General						
State: District:	Calor (Spec	y/ ▼		Me	mo Item			
				<u> </u>				
SUBTOTAL of Disbursements This Page (optional)			·····•		7	577162.17		
TOTAL This Period (last page this line number only).								

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) X 21b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) America PAC	nents may not be sold or us ne and address of any polition	ed by any personal committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) A. PEAK INSIGHTS LLC Mailing Address 350 RYMAN STREETSUITE 300	Date of Disbursement 10				
MISSOULA Purpose of Disbursement SURVEY RESEARCH Candidate Name Office Sought: House Disbursem Senate	State Zip Code 59802 nent For: Primary General Other (specify) Zip Code 59802	Category/ Type	FEC Identification Number C Transaction ID: SB.37 Amount of Each Disbursement this Period 29500.00 Memo Item		
B. PEAK INSIGHTS LLC Mailing Address 350 RYMAN STREETSUITE 300 City S	State Zip Code MT 59802	Category/ Type	Date of Disbursement 10		
	nent For: Primary General Other (specify)	30500.00 Memo Item			
Full Name (Last, First, Middle Initial) C. RED ELEPHANT STRATEGY LLC Mailing Address 25475 MARSH LANDING PKWY	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
PONTE VEDRA BEACH Purpose of Disbursement POLITICAL STRATEGY CONSULTING Candidate Name Office Sought: House Disbursem Senate	Primary General	Category/ Type	FEC Identification Number C Transaction ID : SB.25 Amount of Each Disbursement this Period 30000.00		
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			90000.00		

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SCHEDULE B (FEC Form 3X)	Har -	make extract to ()	FOR LINE	NUMBER:		PAGE 14 OF 224
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check on			
		Summary Page	X 21b		23 28c	26 27 29 30b
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NAME OF COMMITTEE (In Full)		, ,				
America PAC						
/				+		
Full Name (Last, First, Middle Initial)				Date of	Disbursem	ent
A. RIGHTSIDE COMPLIANCE LLC	" RIGHTSIDE COMPLIANCE LLC					
Mailing Address PO BOX 341027					04	2024
City	tate	Zip Code		EEC Id	entification I	Number
7.007	TX	78734				Number 1
Purpose of Disbursement COMPLIANCE CONSULTING				C		
Candidate Name				1	nsaction ID	
			Category/ Type	Amoun	of Each Di	isbursement this Period
Office Sought: House Disbursem	ent For:		.,,,,	"		30041.80
Senate	Primary	General			7	7 7
	Other (spec	ify) ▼		Me	mo Item	
State: District:						
Full Name (Last, First, Middle Initial) B. CTDATECIC ANALYTICS AND CO				Data of	Dioburoom	ant
STRATEGIC ANALYTICS AND CO	NSULT	ING, LLC			Disbursem	_
Mailing Address 1400 VILLAGE SQUARE BLVDSTI	E 3-277			10	04	2024
•						
,	tate	Zip Code		FEC Id	entification I	Number
TALLAHASSEE Purpose of Disbursement	FL	32312				
POLITICAL STRATEGY CONSULTING			· · · ·	C		
Candidate Name			Cotogony	I	nsaction ID	SB.23 isbursement this Period
			Category/ Type	Amoun	OI Lacii Di	isbuisement this renou
Office Sought: House Disbursem	ent For:	-		11.		20000.00
	Primary	General			,	,
	Other (spec	ify)		Me	mo Item	
State: District:						
Full Name (Last, First, Middle Initial) C. TIC CODE ENDRUMENO				Date of	Disbursem	ent
T'S SCREENPRINTING				M M	/ D D	/ Y Y Y Y Y
Mailing Address 24419 S PERSIMMON LANE				10	04	2024
,	tate	Zip Code		FFC Id	entification I	Number
. 2002 (МО	64078				
Purpose of Disbursement CANVASSING FIELD OPERATIONS UNIFORMS				C		
Candidate Name					nsaction IE	
			Category/ Type	Amoun	or ⊨ach Di	isbursement this Period
Office Sought: House Disbursem	ent For:) F -	 [65044.06
Senate	Primary	General			J	7
	Other (spec	ify) 🔻		Me	mo Item	
State: District:						
						115085.86
SUBTOTAL of Disbursements This Page (optional)			·····•			1.1000.00
TOTAL This Period (last page this line number only).						

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	FOR LINE NUMBER: PAGE 15 OF 224 (check only one)			
	Detailed S	Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b			
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NAME OF COMMITTEE (In Full)		, p3or					
America PAC							
Full Name (Last, First, Middle Initial) A. ADVANTAGE INC				Date of Disbursement			
A. ADVANTAGE, INC.				Date of Dispursement			
Mailing Address 9420 BONITA BEACH ROAD SES	SUITE 20			10 07 2024			
,	State FL	Zip Code		FEC Identification Number			
BONITA SPRINGS Purpose of Disbursement	r'L	34135					
SUSCRIPTION				C			
Candidate Name			Cotomic	Transaction ID : SB.47			
# - F			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburser	ment For:		- , , , ,	13000.00			
Senate	Primary	General		4 4			
President	Other (spec	pify) ▼		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial)							
B. CHAIN BRIDGE BANK				Date of Disbursement			
				M = M / D = D / Y = Y = Y			
Mailing Address 1390 CHAIN BRIDGE RD STE 51		Tau		10 07 2024			
,	State VA	Zip Code 22101		FEC Identification Number			
MCLEAN Purpose of Disbursement	٧٨	22101					
BANK FEE				C			
Candidate Name			Cotoggg	Transaction ID : SB.3			
			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburser	ment For:	I	- , , , ,	177.50			
Senate	Primary	General		4 4			
President	Other (specify)			Memo Item			
State: District:				Memo Item			
Full Name (Last, First, Middle Initial)							
C. PEAK INSIGHTS LLC				Date of Disbursement			
				M M / D D / Y Y Y Y			
Mailing Address 350 RYMAN STREETSUITE 300				10 07 2024			
City	State	Zip Code		EEC Identification Number			
MISSOULA	MT	59802		FEC Identification Number			
Purpose of Disbursement							
SURVEY RESEARCH				Transaction ID : SB.39			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Cought: House	mont Farr		Туре	61000.00			
Office Sought: House Disburser Senate	ment For:	General		01000.00			
President	Primary Other (spec	☐ General		п.,			
State: District:	Sanor (Spec	▼		Memo Item			
2.5							
SUBTOTAL of Disbursements This Page (optional)				74177.50			
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SCHEDULE B (FEC Form 3X)	Use separate so	hedule(s)	FOR LINE N		PAGE 16 OF 224
ITEMIZED DISBURSEMENTS	for each categor Detailed Summa	y of the	(check only 21b 28a	22 2	3 26 27 8c 29 30b
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NAME OF COMMITTEE (In Full)	c and address of	arry political	COMMITTEE TO	3011011 COTHETBULE	ions from sacri committee.
America PAC					
Full Name (Last, First, Middle Initial)				Date of Disbu	
PUBLIC OPINION STRATEGIES, LL	PUBLIC OPINION STRATEGIES, LLC				
Mailing Address 214 N FAYETTE STREET				10	07 2024
,	tate Zip C VA 223			FEC Identifica	ation Number
Purpose of Disbursement	<u> </u>			C	
SURVEY RESEARCH					ion ID : SB.40
Candidate Name			Category/ Type	Amount of Ea	ach Disbursement this Period
Office Sought: House Disbursem		2	71: -		27000.00
President	Primary (Sther (specify) V	General		Memo Ite	em
State: District:				Ш	
Full Name (Last, First, Middle Initial)				Data of Diab	uroomont
B. T'S SCREENPRINTING				Date of Disbu	D D / Y Y Y Y
Mailing Address 24419 S PERSIMMON LANE		10	07 2024		
,	tate Zip C			FEC Identifica	ation Number
PECULIAR Purpose of Disbursement	MO 640	/8			
CANVASSING FIELD OPERATIONS UNIFORMS		- 1		C	
Candidate Name			Category/		ion ID: SB.11 ach Disbursement this Period
Office Sought: House Disbursem	ent For:		Туре		46335.00
	Primary	General		7	4 4
President State: District:	Other (specify)			Memo Ite	em
Full Name (Last, First, Middle Initial)					
^{C.} CHAIN BRIDGE BANK				Date of Disbu	
Mailing Address 1390 CHAIN BRIDGE RD STE 515				10	08 2024
· · · · · · · · · · · · · · · · · · ·	tate Zip C			FEC Identifica	ation Number
	VA 221	01		1.1	
Purpose of Disbursement BANK FEE		Г		C	
Candidate Name			Category/ Type		tion ID: SB.4 ach Disbursement this Period
Office Sought: House Disbursem	ent For:		Туре		52.50
		General		7	4 4
	Other (specify) ▼			Memo Ite	em
State: District:					
SUBTOTAL of Disbursements This Page (optional)			·····•		73387.50
TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule		
TILIMIZED DIODONGLIVILINIO	for each category of th Detailed Summary Pag	ie 📗 🔽 21h	22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
America PAC			
Full Name (Last, First, Middle Initial) A. CARDI			Date of Disbursement
A. CMDI			M M / D D / Y Y Y
Mailing Address 1593 SPRING HILL RD STE 400			10 08 2024
	tate Zip Code VA 22182		FEC Identification Number
Purpose of Disbursement	22102		
DATABASE MANAGEMENT SERVICES			C Transportion ID - SD 46
Candidate Name		Category/	Transaction ID : SB.16 Amount of Each Disbursement this Period
		Type	
Office Sought: House Disbursem			500.00
	Primary Genera	u	
State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. CHAIN BRIDGE BANK			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 1390 CHAIN BRIDGE RD STE 515		10 09 2024	
,	tate Zip Code VA 22101		FEC Identification Number
Purpose of Disbursement	22101		C
BANK FEE			Transaction ID : SB.5
Candidate Name		Category/	Amount of Each Disbursement this Period
		Type	
Office Sought: House Disbursem			335.00
	Primary Genera	ll .	
State: District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
C. IMGE LLC			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 1401 H STREET NW SUITE 550			10 09 2024
City	tate Zip Code		FEC Identification Number
177.01101.01.1	DC 20005		
Purpose of Disbursement			C
POLITICAL STRATEGY CONSULTING/TRAVEL Candidate Name		السيا	Transaction ID : SB.30
Caraladio Harrio		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	ent For:	1 76-2	20011.27
Senate	Primary Genera	ıl	
	Other (specify) ▼		Memo Item
State: District:			_
			20846.27
SUBTOTAL of Disbursements This Page (optional)		·····	20040.21
TOTAL This Period (last page this line number only).			

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 O	F 22
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) X 21b 22 28a 28b 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	and address of any pontion	Committee to const contributions from such confinite	
America PAC			
Full Name (Last, First, Middle Initial)		5. (5.)	
MGE LLC		Date of Disbursement	Υ
Mailing Address 1401 H STREET NW SUITE 550		10 09 2024	
City WASHINGTON	State Zip Code 20005	FEC Identification Number	
Purpose of Disbursement		C	
POLITICAL STRATEGY CONSULTING/TRAVEL		Transaction ID : SB.31	
Candidate Name	-	Category/ Type Amount of Each Disbursement this Po	eriod
Office Sought: House Disburser	ment For:	22987.76	3
Senate	Primary General		
State: District:	Other (specify) ▼	Memo Item	
Full Name (Last, First, Middle Initial)			
B. IMGE LLC		Date of Disbursement	V
Mailing Address 1401 H STREET NW SUITE 550		10 09 2024	Y
,	State Zip Code	FEC Identification Number	
WASHINGTON	DC 20005		
Purpose of Disbursement	l r	C	
TEXTING SERVICE Candidate Name		Transaction ID : SB.49	
Candidate Name		Category/ Amount of Each Disbursement this Portion Type	eriod
Office Sought: House Disburser	ment For:	20570.00	o
Senate	Primary General		
State: President State:	Other (specify)	Memo Item	
Full Name (Last, First, Middle Initial)			
. IMGE LLC		Date of Disbursement	V
Mailing Address 1401 H STREET NW SUITE 550		10 09 2024	1
City	State Zip Code	EEC Identification Number	
WASHINGTON	DC 20005	FEC Identification Number	
Purpose of Disbursement	Г	C	
TEXTING SERVICE Candidate Name	L	Transaction ID : SB.50 Category/ Amount of Each Disbursement this Po	eriod
Office Sought: House Disburser	ment For:	Type 213.20	0
	Primary General	210,20	-
President	Other (specify)	п	
State: District:	(1 - 3) - √	Memo Item	
SUBTOTAL of Disbursements This Page (optional)		43770.9	6
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
ITEMIZED DISBURSEMENTS	for each category of the	(check only 21b	one) 22 23 26 27
	Detailed Summary Page	28a	28b 28c 29 30b
Any information copied from such Reports and Statem			
or for commercial purposes, other than using the name	ne and address of any political	committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
/ America PAC			
Full Name (Last, First, Middle Initial)			D (B)
^{A.} P2 PATHWAY PUBLIC AFFAIRS LLO	C		Date of Disbursement
Mailing Address 1401 H ST NW STE 550			10 09 2024
,	State Zip Code DC 20005		FEC Identification Number
WASHINGTON Purpose of Disbursement	DC 20005		
.			C
TRAVEL/FOOD/BEVERAGES/OFFICE SUPPLIES Candidate Name			Transaction ID : SB.53
Sandado Ivanio		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:		56875.94
Senate	Primary General		,
State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
			Date of Disbursement
T'S SCREENPRINTING			M = M / D = D / Y = Y = Y
Mailing Address 24419 S PERSIMMON LANE			10 09 2024
,	State Zip Code		FEC Identification Number
. 2002	MO 64078		
Purpose of Disbursement	l l		C
CANVASSING FIELD OPERATIONS UNIFORMS Candidate Name			Transaction ID : SB.12
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For	Туре	128332.47
	Primary General		7 7 7
	Other (specify)		D
State: District:	(ep)		Memo Item
Full Name (Last, First, Middle Initial)			Data of Disharanana
CHAIN BRIDGE BANK			Date of Disbursement
Mailing Address 1390 CHAIN BRIDGE RD STE 515			10 10 2024
City	State Zip Code		FEC Identification Number
MCLEAN	VA 22101		I LO Identification Number
Purpose of Disbursement			
BANK FEE			Transaction ID : SB.6
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser	nent For	Туре	225.00
	Primary General		
	Other (specify) ▼		Mama Itara
State: District:	,		Memo Item
SUBTOTAL of Disbursements This Page (optional)			185433.41
TOTAL This Period (last page this line number only).			

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S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:			PAGE	20 OF	224
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	ny information copied from such Reports and Staten for commercial purposes, other than using the nam									
\setminus	NAME OF COMMITTEE (In Full)									
	America PAC									
_	Full Name (Last, First, Middle Initial)									
Α.	CONNECTION STRATEGY, LLC				Date of Disbursement				1	
	Mailing Address PO BOX 161				10		10		2024	
	,	State WI	Zip Code		FEC Id	entificatio	n Nu	mber		
	HUDSON Purpose of Disbursement	VVI	54016				_			
	•				C					
	MESSAGE PHONE CALLS				Tra	nsactio	າ ID :	SB.22		
	Candidate Name			Category/	Amount	of Each	Disb	urseme	ent this Peri	iod
	Office Cought: House Dishurses	F		Type				1	40223.71	
	Office Sought: House Disbursen		Canaral			-		7	TOZZO.7 1	
		Primary	General							
	State: District:	Other (spec	:iiy) ▼		Me	mo Item				
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В.	Full Name (Last, First, Middle Initial)				Doto of	Dioburo	omon	.+		
Ь.	ALLIANCE FORGE CORPORATION	NC				Disburs				
	Mailing Address FOAR CRANDRELL CIRCLE				10		11	/ Y	2024	1
	Mailing Address 5648 SPANDRELL CIRCLE				10				2024	_
	,	State	Zip Code		FEC Id	entificatio	n Nu	mber		
	SPARKS Purpose of Disbursement	NV	89436				_			
	•				C					
	DATABASE MANAGEMENT SERVICES Candidate Name				Tra	nsaction	ID:	SB.15		
	Candidate Name			Category/	Amount	of Each	Disb	urseme	ent this Peri	iod
	Office Sought: House Disbursen	nont For		Туре					10450.00	
			General			-		7	10400.00	
		Primary Other (spec								
	State: District:	Other (spec	iiy)		Me	mo Item				
_	Full Name (Last, First, Middle Initial)									
C.	,				Date of	Disburs	മനമന	ıt		
٥.	CHAIN BRIDGE BANK									
	Mailing Address 1390 CHAIN BRIDGE RD STE 515	5			10		11	/ Y	2024	
	City	State	Zip Code							
	MCLEAN	VA	22101		FEC Id	entificatio	n Nu	mber		
	Purpose of Disbursement	***			С					
	BANK FEE						- 15	OD 7		
	Candidate Name			Catananı	_	nsactio		_	ent this Peri	hoir
				Category/ Type	Amoun	. OI Laci	DISU	uiseille	in this ren	lou
	Office Sought: House Disbursement For:						-		427.50	
		Primary					_	7		
	President	Other (spec			П.,	"				
	State: District:	(-1	• •		Me	mo Item				
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	o and address of any points		color communication from coor communico.
America PAC			
Full Name (Last, First, Middle Initial)			5 . (5:1
^{A.} IMGE LLC			Date of Disbursement
Mailing Address 1401 H STREET NW SUITE 550			10 11 2024
,	State Zip Code DC 20005		FEC Identification Number
Purpose of Disbursement			C
DATABASE MANAGEMENT/SUBSCRIPTION/WEE	3 SERVICES		Transaction ID : SB.17
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursem	ont For:	Type	222428.12
	Primary General		
	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. MINE CREEK STRATEGIES INC			Date of Disbursement
Mailing Address 400 SAINT CATHERINES CT NW			10 11 2024
ag / taa. eee 400 0/tilVI 0/tilEItilVEO 01 11VV			
,	State Zip Code		FEC Identification Number
	GA 30064		
Purpose of Disbursement POLITICAL STRATEGY CONSULTING			C
Candidate Name			Transaction ID : SB.28
		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	71	20000.00
Senate	Primary General		7 7 7
State: President District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
^{C.} P2 PATHWAY PUBLIC AFFAIRS L	LC		Date of Disbursement
Mailing Address 1401 H ST NW STE 550			10 11 2024
City	State Zip Code		
*	DC 20005		FEC Identification Number
Purpose of Disbursement			C
TRAVEL/FOOD/BEVERAGES/OFFICE SUPPLIES Candidate Name			Transaction ID : SB.54
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	.,,,,	7584.54
Senate	Primary General		7 7
President	Other (specify) ▼		Memo Item
State: District:			L memo nem
SUBTOTAL of Disbursements This Page (optional)			250012.66
TOTAL This Period (last page this line number only).			1

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
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Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	o and address of any politic	our committee to	Const. Contributions from Such Committee.
America PAC			
Full Name (Last, First, Middle Initial)			
A. RACONTEUR MEDIA COMPANY			Date of Disbursement
Mailing Address PO BOX 26511			10 11 2024
,	State Zip Code TX 78755		FEC Identification Number
Purpose of Disbursement	10100		
SUBSCRIPTION/WEB SERVICE/TRAVEL			C
Candidate Name		Cotto	Transaction ID : SB.35
		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	717-	38311.50
Senate	Primary General		
State: President O	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
3. ALX			Date of Disbursement
Mailing Address 261 LOVELL STREET			10 15 2024
,	State Zip Code		FEC Identification Number
	MA 01602		
Purpose of Disbursement		· · · · · · · · · · · · · · · · · · ·	C
SOCIAL MEDIA CONSULTING Candidate Name			Transaction ID : SB.34
Canadato Hamo		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	ı ype	15000.00
	Primary General		
President	Other (specify)		Memo Item
State: District: Full Name (Last, First, Middle Initial)			
CAMPAIGN SIDEKICK			Date of Disbursement
Mailing Address 1550 OLD ANNETTA			10 15 2024
City	State Zip Code		FEC Identification Number
	TX 76008		
Purpose of Disbursement	TION		C
DATABASE MANAGEMENT SERVICE/SUBSCRIP Candidate Name	HUN	Category/	Transaction ID : SB.14 Amount of Each Disbursement this Period
Office Sought: House Disbursem	pont For:	Туре	90164.21
	nent For: Primary General		30104.21
	Other (specify)		П., .
State: District:	(opoo)/ ▼		Memo Item
			143475.71
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SCHEDULE B (FEC Form 3X)	I la - ·	make a decided ()	FOR LINE	NUMBER:		PAGE 23	OF 224
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only one)		J	1 00 -	
		Summary Page	X 21b	22	23	26 27	
			28a	28b	28c	29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)		and the second	00	30			
` ′							
America PAC							
Full Name (Last, First, Middle Initial)				D-4	ioburs		
A. CHAIN BRIDGE BANK				Date of D	isbursemer		
Mailing Address 1390 CHAIN BRIDGE RD STE 515	Mailing Address 1390 CHAIN BRIDGE RD STE 515					2024	
City	state	Zip Code		CEO Idam	ification NI		
•	VA	22101		FEC Iden	ification Nu	ımber	ı
Purpose of Disbursement							
BANK FEE					action ID :	SB.8	
Candidate Name			Category/	Amount of	Each Dist	oursement this	Period
Office Sought: House Disbursem	ont Fam		Туре			602.	50
	Primary	General			7	7	
	Other (spec			п			
State: District:	(Op 00	<i>37</i> , ₹		Memo	Item		
Full Name (Last, First, Middle Initial)							
B. PEAK INSIGHTS LLC				Date of D	isbursemer	nt	
PEAR INSIGHTS LLC				M = M	D D	/ Y = Y = Y	Y
Mailing Address 350 RYMAN STREETSUITE 300				10	15	2024	
,	tate	Zip Code		FEC Ident	ification Nu	umber	
MISSOULA Purpose of Disbursement	MT	59802					
SURVEY RESEARCH				C			
Candidate Name			Ontonor		action ID:		Daviad
			Category/ Type	Amount o	Each Dist	oursement this	Period
Office Sought: House Disbursem	ent For:		71	1		30700.	00
Senate	Primary	General				7	
President	Other (spec	ify)		Memo	Item		
State: District:							
Full Name (Last, First, Middle Initial)							
C. PUBLIC OPINION STRATEGIES, I	LLC				isbursemer		
Mailing Address 214 N FAYETTE STREET				10	15	2024	Y
g							_
•	state	Zip Code		FFC Ident	ification Nu	ımber	
	VA	22314					
Purpose of Disbursement SURVEY RESEARCH							
Candidate Name			لبيا		action ID :	_	Davis
Canada Harro			Category/ Type	Amount o	r ⊨ach Disk	oursement this	Period
Office Sought: House Disbursem	nent For:		.,,,,			108000.	.00
	Primary	General			4	7	
President	Other (spec	eify) ▼		Memo	Item		
State: District:				L WOTE			
						400000	
SUBTOTAL of Disbursements This Page (optional)			······		7	139302	.50
TOTAL This Period (last page this line number only).							
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	
II LIVIIZED DISDUKSEIVIEN IS	for each category of the Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	The state of any points		
America PAC			
Full Name (Last, First, Middle Initial)			
THE TARRANCE GROUP LLC	<u> </u>		Date of Disbursement
Mailing Address 201 N UNION STREET, SUITE 310			10 15 2024
ALEXANDRIA	State Zip Code VA 22314		FEC Identification Number
Purpose of Disbursement			C
SURVEY RESEARCH Candidate Name			Transaction ID : SB.41
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen Senate	nent For: Primary General	.,,,,	31379.00
President State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. UPONE INSIGHTS, LLC			Date of Disbursement
Mailing Address 4251 25TH STREET N	_		10 15 2024
City ARLINGTON	State Zip Code VA 22207		FEC Identification Number
Purpose of Disbursement	22201		C
SURVEY RESEARCH			Transaction ID : SB.44
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen			72000.00
	Primary General Other (specify)		
State: District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial) C. CHAIN BRIDGE BANK			Date of Disbursement
Mailing Address 1390 CHAIN BRIDGE RD STE 515	5		10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		
MCLEAN	VA 22101		FEC Identification Number
Purpose of Disbursement			C
BANK FEE Candidate Name		Category/	Transaction ID : SB.9 Amount of Each Disbursement this Period
	Primary General	Туре	635.00
State: District:	Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)		<u>-</u>	104014.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE			
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Any information copied from such Reports and Statem					
or for commercial purposes, other than using the nam	le and address of any politica	I committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
/ America PAC					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
. IMGE LLC			M M / D D / Y Y Y Y		
Mailing Address 1401 H STREET NW SUITE 550			10 16 2024		
	State Zip Code		FEC Identification Number		
	DC 20005				
Purpose of Disbursement			C		
TEXTING SERVICE Candidate Name			Transaction ID : SB.48		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburser	nent For:		92173.47		
	Primary General				
State: District:	Other (specify) ▼		Memo Item		
Full Name (Last, First, Middle Initial)					
IMS TECHNOLOGY SERVICES IN	JC.		Date of Disbursement		
			M = M / D = D / Y = Y = Y		
Mailing Address 3055 MCCANN FARM DRIVE SUI	TE 105		10 16 2024		
,	State Zip Code		FEC Identification Number		
O/ II II I I I I I I I I I I I I I I I I	PA 19060				
Purpose of Disbursement					
EVENT MANAGEMENT SERIVES/EQUIPMENT RI Candidate Name	ENTAL/STAGING		Transaction ID : SB.19		
Candidate Name		Category/	Amount of Each Disbursement this Period		
Office Sought: House Disbursem	pent For:	Туре	18046.50		
	Primary General		7 7 7		
	Other (specify)				
State: District:	C (cpccy)		Memo Item		
Full Name (Last, First, Middle Initial)			Date of Dishuraneset		
E. LEAD BLOCKER STRATEGIES, L	LC		Date of Disbursement		
Mailing Address 3835 9TH STREET NUNIT 105W			10 16 2024		
City	State Zip Code		FEC Identification Number		
ARLINGTON	VA 22203				
Purpose of Disbursement POLITICAL STRATEGY CONSULTING			C		
Candidate Name		Category/	Transaction ID : SB.29 Amount of Each Disbursement this Period		
Office Sought: House Disbursem	aont For:	Туре	20000.00		
			25555.00		
	Primary General				
State: District:	Other (specify) ▼		Memo Item		
- District.					
SUBTOTAL of Disbursements This Page (optional)			130219.97		
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	•
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Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	e and address of any point	car committee to	solicit contributions from such continuec.
America PAC			
Full Name (Last, First, Middle Initial)			
^{A.} PEAK INSIGHTS LLC			Date of Disbursement
Mailing Address 350 RYMAN STREETSUITE 300			10 16 2024
MISSOULA	State Zip Code 59802		FEC Identification Number
Purpose of Disbursement			
SURVEY RESEARCH			Transaction ID : SB.46
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	туре	31500.00
Senate	Primary General		7 7 7
President State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			_
B			Date of Disbursement
PUBLIC OPINION STRATEGIES,	LLC		M = M / D = D / Y = Y = Y
Mailing Address 214 N FAYETTE STREET			10 16 2024
,	State Zip Code		FEC Identification Number
ALEXANDRIA Purpose of Disbursement	VA 22314		
SURVEY RESEARCH			C
Candidate Name		Category/	Transaction ID : SB.45 Amount of Each Disbursement this Period
		Type	Amount of Each Dispursement this Fellou
Office Sought: House Disburser	nent For:		27000.00
	Primary General		
State: District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
^{C.} RED ELEPHANT STRATEGY LLC			Date of Disbursement
Mailing Address 25475 MARSH LANDING PKWY			10 16 2024
City	State Zip Code		FEC Identification Number
PONTE VEDRA BEACH	FL 32082		
Purpose of Disbursement TRAVEL			C
Candidate Name		Category/ Type	Transaction ID: SB.52 Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	. , , po	2458.20
	Primary General		7 7 4
	Other (specify) ▼		Memo Item
State: District:			L
SUBTOTAL of Disbursements This Page (optional)		······ •	60958.20
TOTAL This Period (last page this line number only).			1

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each ca	ate schedule(s)	(criedit crity crie)		
		ımmary Page	21b 28a	22 23 28b 28c	26 27 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
America PAC					
Full Name (Last, First, Middle Initial)				Date of Dishursame	ont
A. RED MAVERICK MEDIA LLC				Date of Disburseme	ent
Mailing Address 1426 N 3RD STREET STE 310				10 16	2024
HARRISBURG	PA Z	Zip Code 17102		FEC Identification N	Number
Purpose of Disbursement PRINTING			1	C	
Candidate Name			Category	Transaction ID	: SB.33 sbursement this Period
			Category/ Type	Amount of Lacil Di	
Office Sought: House Disbursem	nent For: Primary	General			2760.00
	Other (specify			Memo Item	
Full Name (Last, First, Middle Initial)					
B. STOCKS AND STRONG, LLC				Date of Disburseme	ent
Mailing Address 167 OLD CORINTH ROAD		10 16	2024		
,	State Z GA	Zip Code 30263		FEC Identification N	Number
Purpose of Disbursement				C	
TRAVEL Candidate Name			Category/ Type	Transaction ID Amount of Each Di	: SB.51 sbursement this Period
Office Sought: House Disbursem	nent For:		ı ype		3171.39
	Primary	General			4 4
President State: District:	Other (specify	y)		Memo Item	
Full Name (Last, First, Middle Initial)				Date of Disburseme	ent
SYNERGETIC				M M / D D	/ Y Y Y Y Y
Mailing Address 776 HAUNTED LANE				10 16	2024
City S BENSALEM	tate Z	Zip Code 19020		FEC Identification N	Number
Purpose of Disbursement		·		С	
EVENT MANAGEMENT SERIVES/EQUIPMENT RE Candidate Name	ENTAL/STAG	ING	Category/	Transaction ID	sbursement this Period
Office Sought: House Disbursem	nent For:		Туре		20540.00
	Primary General			4	4 4
	Other (specify	y) ▼		Memo Item	
State: District:					
SUBTOTAL of Disbursements This Page (optional)			······	1 7	26471.39
TOTAL This Period (last page this line number only).					

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SCHEDULE B (FEC Form 3X)	Haa	woto osbasicis/ \	FOR LINE NUMBER: PAGE 28				28 OF	224
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(oricon oring		¬ oc	1 07		
		Detailed Summary Page X 21t 28t 2		22 28b	23 28c	26	27 30b	
Any information copied from such Reports and Stater	nonte mou	not ha cald ar						ne
or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
America PAC								
Full Name (Last, First, Middle Initial)				Date of	Disburseme	ent		
A. THE GOBER GROUP PLLC	M M	/ D D		YYY	-			
Mailing Address PO BOX 341016	10	16		024				
		T						
City AUSTIN	State TX	Zip Code 78734		FEC Ide	ntification N	lumber		
Purpose of Disbursement		76761						
LEGAL CONSULTING/TRAVEL			1 1	C	saction ID	· CD 21	_	
Candidate Name			Category/		of Each Dis	_	this Per	riod
Office Country			Type			00	0046.67	\neg
Office Sought: House Disburser Senate	ment For: Primary	General			7	90	1046.67	_
President	Other (spec			п				
State: District:	ош.о. (оро	<i>y</i> , ∀		Memo Item				
Full Name (Last, First, Middle Initial)								
В.				Date of	Disburseme	ent		
					/ D D	/ Y Y	YY	1
Mailing Address								_
City	State	Zip Code		FFC Ide	ntification N	lumbor		
				FEC Ide	ntification N	lumber	_	
Purpose of Disbursement							.	
Candidate Name								
Caradate Name			Category/ Type	Amount	of Each Dis	sbursement	this Per	riod
Office Sought: House Disburser	ment For:		.,,,,	1				
Senate Primary General							-4-	
President	President Other (specify)				no Item			
State: District:								
Full Name (Last, First, Middle Initial) C.				Date of	Disburseme	ant		
o.				M M	/ D D		YY	-
Mailing Address				- W - W	/			
City	State	Zip Code		FEC Ide	ntification N	lumber		
Purpose of Disbursement				C				
. a.pasa of biobarosinon							_	
Candidate Name Category/				Amount	of Each Dis	sbursement	this Per	riod
			Туре					\neg
Office Sought: House Disburser		Consered			_			
Senate President	Primary Other (spec	General						
State: District:	Other (spec	ony) 🔻		Men	no Item			
								_
SUBTOTAL of Disbursements This Page (optional)					-95-1-	9	0046.67	
						007	0500.40	一
TOTAL This Period (last page this line number only))		·····•			237	9508.48	

TIENNIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE			Amo	uunt.
STE 400			Amo	ourit
City	State	Zip Code		261169.00
SALT LAKE CITY	UT	84106		nsaction ID : SE24.493 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FRINTING/FOSTAGE		Type		10 04 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburseme 2024	ent For:
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE				
STE 400			Amo	punt
City	State	Zip Code		175550.00
SALT LAKE CITY	UT	84106		nsaction ID : SE24.649 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
N (5 1 10 51)				
Name of Federal Candidate:		Support	Office Sou	
TRUMP, DONALD, , ,		Oppose	X Pres	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburseme 2024	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures				436719.00
(a) SOBTOTAL OF NOTINESS INSOPORTION EXPONENTIAL				1007 10.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(S) CODIC IN 2 or ormanized independent Experience				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		• •
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10	04 2024

TIEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
ARENA MAIL & DIGITAL				10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 EAST STRINGHAM AVE			Δ	
STE 400			Amo	ount
City	State	Zip Code		175550.00
SALT LAKE CITY	UT	84106		nsaction ID : SE24.650 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/	\neg	10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		10 13 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	ident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursem 2024	
- W			. .	Other (specify)
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address				09 / 30 / 2024
10065 E HARVARD AVE			Amo	punt
STE 400	Ctoto	Zin Codo	<u> —</u> г	183985.60
City DENVER	State	Zip Code 80231		Insaction ID : SE24.407
Purpose of Expenditure		Category/	Dati	e of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type		10 01 2024
Name of Federal Candidate:		X Support	Office Sou	ght: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	ident Senate State:
Calendar Year-To-Date		distribution in	Disbursem	ent For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;		•	359535.60
				, , , , , , , , , , , , , , , , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	
(c) TOTAL Independent Expenditures			· L	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		
GOBER, CHRIS, , ,		Date	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10	10 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 31 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America FAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item D	rate of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE				
STE 400			A	mount
City	State	Zip Code		183985.60
DENVER	со	80231		ransaction ID : SE24.408 late of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: House District:00
HARRIS, KAMALA, , ,		Oppose	X Pr	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburse 2024	ement For:
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item D	ate of Public Distribution/Dissemination
Mailing Address				09 / 30 / 2024
10065 E HARVARD AVE STE 400			A	mount
City	State	Zip Code		127732.05
DENVER	со	80231	I	Transaction ID : SE24.409 late of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 01 Y Y 2024
Name of Federal Candidate:		X Support	Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pr	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburse 2024	ement For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			[311717.65
(b) SUBTOTAL of Unitemized Independent Expenditure	res		• L	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		·
GOBER, CHRIS, , ,		_ Date	e 10	01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITORES				PAGE 32 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400	0	7. 0. 1		407720.05
City	State	Zip Code		127732.05 Transaction ID : SE24.410
DENVER	CO	80231		Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 01 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	,10	5457794.82	Disbur 2024	sement For:
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		454529.30
DENVER	СО	80231		Transaction ID : SE24.417 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 01 7 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date		distribution in	Disbur	sement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				582261.35
(a) SOBTOTAL OF REITIZED INDEPENDENT EXPENDITURES				302201.33
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures				
			.	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its analysis.	te or authorized			
GOBER, CHRIS, , ,		5 -	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 33 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C coordina
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				mount
STE 400				
City	State	Zip Code		454529.30
DENVER	CO	80231		ransaction ID : SE24.418 rate of Disbursement or Obligation
Purpose of Expenditure		Category/	_	M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 01 2024
Name of Federal Candidate:		Support	Office S	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	N N	resident Senate State:
Calendar Year-To-Date	40	5.45770.4.00		ement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				10 02 2024
STE 400			A	mount
City	State	Zip Code		740857.20
DENVER	со	80231		Fransaction ID : SE24.435
Purpose of Expenditure		Cotogony		ate of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		M 10
Name of Federal Candidate:		X Support	Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pr	resident Senate State:
Calendar Year-To-Date	10	5457794.82		ement For: Primary X General
Per Election for Office Sought	10	3437794.62	2024	Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures				1195386.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y
Signature		_ Date	e 10	01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 34 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				O , M
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	1
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400			′	Milount
City	State	Zip Code		740857.20
DENVER	СО	80231		Fransaction ID: SE24.436 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 04 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date				ement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				10 02 2024
STE 400			F	Amount
City	State	Zip Code		39150.00
DENVER	СО	80231		Transaction ID : SE24.437
Purpose of Expenditure		Category/		Date of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type		10 D D V Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office S	Sought: House District:03
KENT, JOE, , ,		Oppose	P	resident Senate State: WA
Calendar Year-To-Date		635211.89		ement For: Primary X General
Per Election for Office Sought	7 7	033211.03	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • [780007.20
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· • [
(a) TOTAL Independent Expenditures				
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	04 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 35 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address 10065 E HARVARD AVE				10 02 2024
STE 400			Amo	unt
City	State	Zip Code		39150.00
DENVER	СО	80231		nsaction ID : SE24.438
Purpose of Expenditure		0-1	Date	e of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 7 2024
Name of Federal Candidate:		Support	Office Sou	ght: X House District:03
GLUESENKAMP PEREZ, MARIE, , ,		Oppose	Presi	dent Senate State: WA
Calendar Year-To-Date			Disburseme	ent For: Primary X General
Per Election for Office Sought	7-1-1-7-	635211.89	2024	Other (specify) ▶
Full Name of Payee		Memo		e of Public Distribution/Dissemination
BLITZ CANVASSING LLC		Wellie		M = M / D = D / Y = Y = Y
Mailing Address				10 02 2024
10005 E HARVARD AVE			Amo	unt
STE 400	State	Zin Codo		89077.50
City DENVER		Zip Code		nsaction ID : SE24.439
	СО	80231		of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		M 10
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 17
LAWLER, MIKE, , ,		Oppose	Presi	NV
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought	4	1411214.06	2024	
	,			Other (specify)
				100007 50
(a) SUBTOTAL of Itemized Independent Expenditures			· L	128227.50
(L) CURTOTAL of Unitersity of Indiana and ant Francisch				
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· L	, , , , , , , , , , , , , , , , , , , ,
(c) TOTAL Independent Expenditures			. 🖂	
(c) TOTAL independent Expenditures			•	, , , , , , , , , , , , , , , , , , , ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
party committee, any pontical party committee of its	agont.			
GOBER, CHRIS, , ,		Date	M M M	04 2024

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NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
· ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		89077.50
DENVER	СО	80231		Transaction ID : SE24.440 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 7 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 17
JONES, MONDAIRE, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	7	1411214.06	Disbu 2024	rsement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		47250.00
DENVER	со	80231		Transaction ID : SE24.441 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		
Name of Federal Candidate:		X Support	Office	Sought: House District: 02
THERIAULT, AUSTIN, , ,		Oppose		President Senate State: ME
Calendar Year-To-Date		772683.43	1	rsement For: Primary X General
Per Election for Office Sought	7	112003.43	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				136327.50
(b) SUBTOTAL of Unitemized Independent Expenditur	es		. •	
/ · === · · · · · · · · · · · · · · · ·				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		- .	M	M / D D / Y Y Y Y Y
Signature		_ Date	e 1	04 2024

TILIMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	_	of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE			Amou	10 02 2024
STE 400			Amoc	
City	State	Zip Code		47250.00
DENVER	СО	80231	I	saction ID : SE24.442 of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 7 2024
Name of Federal Candidate:		Support	Office Soug	ht: X House District:02
GOLDEN, JARED, , ,		Oppose	Presid	ME
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	772683.43	Disburseme	nt For:
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
BLITZ CANVASSING LLC			l r	10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400			Amou	ınt
City	State	Zip Code		66566.25
DENVER	СО	80231		saction ID : SE24.443 of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 7 2024
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 45
STEEL, MICHELLE, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 7	1074401.97	Disburseme	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	·		· [113816.25
(b) SUBTOTAL of Unitemized Independent Expenditu	roo		. =	
(b) 306101AL of Officernized independent Experiditu	165		• 🗀	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•		•
GOBER, CHRIS, , ,		Date	10	04 2024
Signature		_ Date	, 10	2027

TEMIZED INDEPENDENT EXPENDITURES				PAGE 38 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼ C. C00879510
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 7 2024
Mailing Address 10065 E HARVARD AVE				Amount
STE 400				
City	State	Zip Code		66566.25
DENVER	CO	80231		Transaction ID: SE24.444 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 04 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 45
TRAN, DERRICK, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		1074401.97	1	sement For: Primary X General
Per Election for Office Sought	7-1-1-7-	107 4401.97	2024	Other (specify) >
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				10 02 2321
STE 400				Amount
City	State	Zip Code		79447.50
DENVER	со	80231		Transaction ID : SE24.445 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 04 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 41
CALVERT, KEN, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		1277455.72	1	sement For: Primary X General
Per Election for Office Sought	7-1-1-5-	1277400.72	2024	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures			. •	146013.75
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL lands and land Forman discuss				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe	ent expenditures	renorted herein were	not ma	de in cooperation consultation or concert
with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
party committee of its	agoni.			
GOBER, CHRIS, , ,		5 .	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	2027

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 39 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				nount
STE 400			AI	nount
City Stat	e	Zip Code		79447.50
DENVER	СО	80231		ransaction ID : SE24.446 ate of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 7 2024
Name of Federal Candidate:		Support	Office So	ought: X House District: 41
ROLLINS, WILL, , ,		Oppose		esident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		1277455.72	Disburse 2024	ment For:
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 7 2024
Mailing Address 10065 E HARVARD AVE				
STE 400			Ar	nount
City	ie	Zip Code		51761.25
DENVER	CO	80231		ransaction ID : SE24.447 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		10 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		10 04 2021
Name of Federal Candidate:		X Support	Office So	ought: X House District: 22
VALADAO, DAVID, , ,		Oppose	Pre	esident Senate State: CA
Calendar Year-To-Date		809994.44		ment For: Primary X General
Per Election for Office Sought		000004.44	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	131208.75
(b) SUBTOTAL of Unitemized Independent Expenditures			•	
(c) TOTAL Independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the independent ex with, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent	authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	10	04 2024

PAGE 40 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee BLITZ CANVASSING LLC 02 2024 Mailing Address 10065 E HARVARD AVE Amount **STE 400** City State Zip Code 51761.25 **DENVER** CO 80231 Transaction ID: SE24.448 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 10 2024 Type 22 Name of Federal Candidate: Support Office Sought: X House District: SALAS, RUDY, , , CA Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 809994.44 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item BLITZ CANVASSING LLC 02 2024 10 Mailing Address 10065 E HARVARD AVE Amount STE 400 63618.75 City State Zip Code Transaction ID: SE24.449 **DENVER** CO 80231 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 10 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: 13 X Support X House Office Sought: District: COUGHLIN, KEVIN, , , ОН Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1033567.73 2024 Per Election for Office Sought Other (specify) ▶ 115380.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 04 10 Date Signature

Signature

SCHEDULE E (FEC Form 3X)

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TEMIZED INDEPENDENT EXPENDITURES				PAGE 41 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ac				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
				10 02 7 2024
Mailing Address 10065 E HARVARD AVE				Amount
STE 400				Attiount
City	State	Zip Code		63618.75
DENVER	СО	80231		Transaction ID : SE24.450 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 13
SYKES, EMILIA, , ,		Oppose	l	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7	1033567.73	Disburs 2024	sement For:
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				10 02 2021
STE 400				Amount
City	State	Zip Code		48037.50
DENVER	СО	80231		Transaction ID : SE24.451 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	4	10 04 2024
Name of Federal Candidate:		X Support	Office	Sought: X House District: 09
MERRIN, DERRICK, , ,		Oppose	F	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 7	832697.30	Disburs 2024	sement For: ☐ Primary ☐ General ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		. •	111656.25
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

PAGE 42 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee BLITZ CANVASSING LLC 02 2024 Mailing Address 10065 E HARVARD AVE Amount **STE 400** City State Zip Code 48037.50 **DENVER** CO 80231 Transaction ID: SE24.452 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 10 2024 Type 09 Name of Federal Candidate: Support Office Sought: X House District: KAPTUR, MARCY, , , OH Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 832697.30 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item BLITZ CANVASSING LLC 02 2024 10 Mailing Address 10065 E HARVARD AVE Amount STE 400 136400.00 City State Zip Code **DENVER** Transaction ID: SE24.456 CO 80231 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 10 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: 80 X Support X House Office Sought: District: JUNGE, PAUL, , , MI Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 576080.00 2024 Per Election for Office Sought Other (specify) ▶ 184437.50 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 04 10 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 43 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item D	ate of Public Distribution/Dissemination
				10 02 / Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			Aı	mount
STE 400	Otata	Zin Codo		136400.00
City	State	Zip Code		ransaction ID : SE24.457
DENVER	CO	80231		ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 04 2024
Name of Federal Candidate:		Support	Office So	ought: X House District: 08
MCDONALD, KRISTEN, , ,		Oppose	Pr	esident Senate State: MI
Calendar Year-To-Date		1	1	ment For: Primary X General
Per Election for Office Sought	77-	576080.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y
Mailing Address 10065 F HARVARD AVE				10 02 2024
10005 E HARVARD AVE			Aı	mount
STE 400	State	Zip Code	— г	136400.00
City DENVER				ransaction ID : SE24.458
	СО	80231	I	ate of Disbursement or Obligation
Purpose of Expenditure		Category/		10 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		
Name of Federal Candidate:		X Support	Office So	ought: House District: 07
BARRETT, TOM, , ,		Oppose	Pre	esident Senate State: MI
Calendar Year-To-Date		E76E09 00		ment For: Primary X General
Per Election for Office Sought	7	576598.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			[272800.00
.,				
(b) SUBTOTAL of Unitemized Independent Expenditure	es		[
, , ,				
(c) TOTAL Independent Expenditures				
,				
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidar party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y
Signature		_ Date	10	04 2024

ITEMIZED INDEPENDENT EXPENDITURES PAGE 44 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee BLITZ CANVASSING LLC 02 2024 Mailing Address 10065 E HARVARD AVE Amount **STE 400** City State Zip Code 136400.00 **DENVER** CO 80231 Transaction ID: SE24.459 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 10 2024 Type 07 Name of Federal Candidate: Support Office Sought: X House District: HERTEL, CURTIS, , , MI Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 576598.00 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item BLITZ CANVASSING LLC 02 2024 10 Mailing Address 10065 E HARVARD AVE Amount STE 400 136400.00 City State Zip Code **DENVER** Transaction ID: SE24.460 CO 80231 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 10 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: 10 X Support X House Office Sought: District: JAMES, JOHN, , , MI Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 574006.00 2024 Per Election for Office Sought Other (specify) ▶ 272800.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 04 10 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 45 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		136400.00
DENVER	CO	80231		Transaction ID : SE24.461 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: X House District: 10
MARLINGA, CARL, , ,		Oppose		President Senate State: MI
Calendar Year-To-Date		Z		sement For: Primary X General
Per Election for Office Sought		574006.00	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y
Mailing Address 10065 E HARVARD AVE				10 07 2024
STE 400				Amount
City	State	Zip Code		48037.50
DENVER	со	80231		Transaction ID : SE24.535 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 09 2024
Name of Federal Candidate:		X Support	Office	Sought: Mouse District: 09
MERRIN, DERRICK, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date		832697.30		sement For: Primary King General
Per Election for Office Sought	7 7	032097.30	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	184437.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	7 7 7
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
Signature		_ Date	e 10	04 2024

PAGE 46 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee BLITZ CANVASSING LLC 07 2024 Mailing Address 10065 E HARVARD AVE Amount **STE 400** City State Zip Code 48037.50 **DENVER** CO 80231 Transaction ID: SE24.536 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 10 09 2024 Type 09 Name of Federal Candidate: X House Support Office Sought: District: KAPTUR, MARCY, , , OH Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 832697.30 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item BLITZ CANVASSING LLC 07 2024 Mailing Address 10065 E HARVARD AVE Amount STE 400 63618.75 City State Zip Code Transaction ID: SE24.537 **DENVER** CO 80231 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 10 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: 13 X Support X House Office Sought: District: COUGHLIN, KEVIN, , , ОН Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1033567.73 2024 Per Election for Office Sought Other (specify) ▶ 111656.25 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 09 2024 10 Date Signature

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		63618.75
DENVER	СО	80231		Transaction ID : SE24.538 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/	П	10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 09 2024
Name of Federal Candidate:		Support	Office	Sought: Mouse District: 13
SYKES, EMILIA, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date		1033567.73		rsement For: Primary X General
Per Election for Office Sought	7 7	1000007.70	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		51761.25
DENVER	со	80231		Transaction ID : SE24.539 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		10 09 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 22
VALADAO, DAVID, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		809994.44		rsement For: Primary X General
Per Election for Office Sought	7 - 7 -	00000	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				115380.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(a) TOTAL Independent Evpanditures				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its	te or authorized			
CORED CHRIS			M	M / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	09 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C cocordia
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400				Amount
City	State	Zip Code		51761.25
DENVER	CO	80231		Transaction ID : SE24.540 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Туре		
Name of Federal Candidate:		Support	Office	Sought: House District: 22
SALAS, RUDY, , ,		X Oppose		President Senate State: CA
Calendar Year-To-Date		809994.44	Disbur	sement For: Primary X General
Per Election for Office Sought	7	00000	2024	Other (specify) ▶
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 / Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		66566.25
DENVER	со	80231		Transaction ID : SE24.541 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 09 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 45
STEEL, MICHELLE, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		1074401.97	1	sement For: Primary X General
Per Election for Office Sought	7 7	1074401.97	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	118327.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. ▶	
(a) TOTAL Independent Evpenditures				
(c) TOTAL Independent Expenditures	•••••		•	7 7 7
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidar party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,			M =	M / D D / Y Y Y Y
Signature		_ Date	e 10	09 2024

TEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE			L	10 07 2024
STE 400			Amou	nt
City	State	Zip Code	─ <u> </u>	66566.25
DENVER	СО	80231		action ID : SE24.542 of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type	, and the same of	10 / 09 / Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	it: X House District: 45
TRAN, DEREK, , ,		Oppose	Preside	CA
Calendar Year-To-Date Per Election for Office Sought	, , , ,	1074401.97	Disbursemer 2024	t For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 7 2024
Mailing Address 10065 E HARVARD AVE			Amou	nt
STE 400			741104	
City DENVER	State	Zip Code 80231		47250.00 saction ID : SE24.543
Purpose of Expenditure		Category/	Date	of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type		10 09 2024
Name of Federal Candidate:		X Support	Office Sough	t: X House District:02
THERIAULT, AUSTIN, , ,		Oppose	Preside	ent Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7	772683.43	Disbursemer 2024	t For:
(a) SUBTOTAL of Itemized Independent Expenditures				113816.25
, , ,				7
(b) SUBTOTAL of Unitemized Independent Expenditure	9S		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized	•		•
GOBER, CHRIS, , ,			M = M /	00 / Y Y Y Y
Signature		_ Date	10	09 2024

TEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	M	f Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE			Amoun	10 07 2024
STE 400			7 1110 011	· · · · · · · · · · · · · · · · · · ·
City	State	Zip Code		47250.00
DENVER	CO	80231		action ID : SE24.544 f Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type	М	10 09 / 2024
Name of Federal Candidate:		Support	Office Sought	: X House District:02
GOLDEN, JARED, , ,		Oppose	Preside	nt Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		772683.43	Disbursement 2024 Ot	For:
Full Name of Payee		☐ Memo	Item Date o	f Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 / Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			Amoun	
STE 400			Amoun	· · · · · · · · · · · · · · · · · · ·
City DENVER	State CO	Zip Code 80231	I	39150.00 action ID : SE24.545
Purpose of Expenditure			Date o	f Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		10 09 / 2024
Name of Federal Candidate:		Support	Office Sought	: X House District:03
KENT, JOE, , ,		Oppose	Preside	nt Senate State: WA
Calendar Year-To-Date Per Election for Office Sought		635211.89	Disbursement 2024 Ot	For: ☐ Primary ☐ General
(a) SUBTOTAL of Itemized Independent Expenditures			. [86400.00
(b) SUBTOTAL of Unitemized Independent Expenditure	S		· [
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its at	e or authorized	•		•
GOBER, CHRIS, , ,		_	M = M /	00 / Y Y Y Y
Signature		_ Date	10	09 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 51 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400				
City	State	Zip Code		39150.00
DENVER	CO	80231		Transaction ID: SE24.546 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Cupport	Office	Sought: X House District: 03
GLUESENKAMP PEREZ, MARIE, , ,		Support Oppose	l	President Senate State: WA
Calendar Year-To-Date			Disbu	rsement For: Primary X General
Per Election for Office Sought	7-1-1-7-	635211.89	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		1733873.90
DENVER	со	80231		Transaction ID : SE24.547 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type	٦l	10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82		rsement For: Primary X General
Per Election for Office Sought	7 7	0407734.02	2024	Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures				1773023.90
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	09 2024

TIEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M = M / D = D / Y = Y = Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE			Amou	10 07 2024
STE 400			Amor	ant.
City	State	Zip Code		1733873.90
DENVER	СО	80231		saction ID : SE24.548 of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 09 7 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	, 10	5457794.82	Disburseme	nt For:
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
BLITZ CANVASSING LLC			1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400			Amo	unt
City	State	Zip Code	— []	79447.50
DENVER	со	80231		of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 / 09 / 2024
Name of Federal Candidate:			0111 0	ht: V House District: 41
CALVERT, KEN, , ,		Support Oppose	Office Soug	Tit. District.
Calendar Year-To-Date		4077455 70	Disburseme	
Per Election for Office Sought	TT-	1277455.72	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				1813321.40
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	7 1 7 1 7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized	•		•
GOBER, CHRIS, , ,		D-4-	M M /	09 2024
Signature		_ Date	, 10	ZUZT

TIENNIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			Amo	nunt
STE 400				
City	State	Zip Code		79447.50
DENVER	СО	80231		nsaction ID : SE24.519 e of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 09 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District: 41
ROLLINS, WILL, , ,		X Oppose	Pres	ident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		1277455.72	Disbursem 2024	
Edit Marca of Paras			u Date	Other (specify)
Full Name of Payee BLITZ CANVASSING LLC		∐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address				10 07 7 2024
10065 E HARVARD AVE			Amo	punt
STE 400	State	Zip Code	— г	89077.50
DENVER	CO	80231	I	nsaction ID : SE24.520 e of Disbursement or Obligation
Purpose of Expenditure		Category/	Date	M M / D D / Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		10 09 2024
Name of Federal Candidate:		X Support	Office Sou	ght: House District:17
LAWLER, MIKE, , ,		Oppose	Pres	ident Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		1411214.06	Disbursem 2024	ent For: Primary X General
Per Election for Office Sought	7 7		2021	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • L	168525.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(b) 332131AL of Officernized macpendant Experiate			•	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		• •
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	10	09 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 54 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				10 07 2024
STE 400			Ar	nount
City	State	Zip Code		89077.50
DENVER	со	80231		ransaction ID : SE24.521
Purpose of Expenditure		Category/	Da	ate of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type		10 09 2024
Name of Federal Candidate:		Support	Office So	ought: X House District: 17
JONES, MONDAIRE, , ,		Oppose	Pre	esident Senate State: NY
Calendar Year-To-Date			Disburse	ment For: Primary X General
Per Election for Office Sought	7-1-1-7-	1411214.06	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y
Mailing Address				10 10 2024
10065 E HARVARD AVE STE 400			Ar	mount
City	State	Zip Code	— I	1060666.67
DENVER	со	80231	I	ransaction ID : SE24.625
Purpose of Expenditure			Da	ate of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		M 10 / D 11 / Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office So	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date	10	E4E7704 92		ment For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				1149744.17
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
COBED CHDIS			М = М	/ D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	09 2024

PAGE 55 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee BLITZ CANVASSING LLC 10 2024 Mailing Address 10065 E HARVARD AVE Amount **STE 400** City State Zip Code 1060666.66 **DENVER** CO 80231 Transaction ID: SE24.626 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 10 2024 Type Name of Federal Candidate: 00 Office Sought: Support House District: HARRIS, KAMALA, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 105457794.82 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item BLITZ CANVASSING LLC 2024 Mailing Address 10065 E HARVARD AVE Amount STE 400 1381305.50 City State Zip Code **DENVER** Transaction ID: SE24.706 CO 80231 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 15 10 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: X Support Office Sought: House District: TRUMP, DONALD, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 105457794.82 2024 Per Election for Office Sought Other (specify) ▶ 2441972.16 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 10 11 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 56 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400			Amo	ount
City	State	Zip Code		1381305.50
DENVER	со	80231		nsaction ID : SE24.707 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_ _	10 15 2024
Name of Federal Candidate:		Support	Office Sou	ight: House District:00
HARRIS, KAMALA, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date		iniaia ia	Disbursem	ent For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				10 14 2024
STE 400			Ame	ount
City	State	Zip Code		39150.00
DENVER	со	80231		nnsaction ID : SE24.741
Purpose of Expenditure		Category/	Dat	e of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type	_	10 16 2024
Name of Federal Candidate:		X Support	Office Sou	ight: K House District: 03
KENT, JOE, , ,		Oppose	Pres	sident Senate State: WA
Calendar Year-To-Date		625244.00	Disbursem	ent For: Primary X General
Per Election for Office Sought	7 7	635211.89	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				1420455.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CORED CHDIS			M = M	/ D D / Y T Y T Y
GOBER, CHRIS, , , Signature		_ Date	e 10	15 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400				Amount
City	State	Zip Code		39150.00
DENVER	СО	80231		Transaction ID : SE24.742 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/	пl	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		10 10 2024
Name of Federal Candidate:		Support	Office	Sought: Mouse District:03
GLUESENKAMP PEREZ, MARIE, , ,		Oppose		President Senate State: WA
Calendar Year-To-Date		635211.89	1	sement For: Primary X General
Per Election for Office Sought	7-1-1-7-	033211.09	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		89077.50
DENVER	со	80231		Transaction ID : SE24.743 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	\neg	M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_	10 16 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 17
LAWLER, MIKE, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date		1411214.06		sement For: Primary X General
Per Election for Office Sought	7 7	1411214.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	128227.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. ▶	
(a) TOTAL Independent Evpanditures				
(c) TOTAL Independent Expenditures	•••••		•	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
Signature		_ Date	e 10	16 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 58 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M M / D D / Y Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address 10065 E HARVARD AVE				
STE 400			Amo	unt
City	State	Zip Code		89077.50
DENVER	со	80231		saction ID : SE24.744
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/	Date	of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Турс		
Name of Federal Candidate:		Support	Office Soug	ht: House District: 17
JONES, MONDAIRE, , ,		Oppose	Presid	dent Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	<u></u>	1411214.06	Disburseme	ent For: ☐ Primary ☐ General Other (specify) ►
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
BLITZ CANVASSING LLC		ivieino	item Bato	M M / D D / Y Y Y Y
Mailing Address			— L	10 14 2024
Mailing Address 10065 E HARVARD AVE			Amo	unt
STE 400	01-1-	75- O- d-		47350.00
City	State	Zip Code		47250.00 nsaction ID : SE24.745
DENVER	СО	80231		of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		M 10 / 16 / Y Y Y Y Y Y 1
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 02
THERIAULT, AUSTIN, , ,		Oppose	Presid	
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought	7	772683.43	2024 —	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			· [136327.50
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	7 1 7 1 7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M /	16 2024

TEMPED HOLI ENDERT EXI ENDITORED				FOR LINE 24 OF FORM 2V
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		47250.00
DENVER	со	80231		Transaction ID : SE24.746 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		10 16 2024
Name of Federal Candidate:		Support	Office	e Sought:
GOLDEN, JARED, , ,		Oppose		President Senate State: ME
Calendar Year-To-Date		772683.43	1	rsement For: Primary X General
Per Election for Office Sought	7-1-1-7-	772003.43	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		66566.25
DENVER	со	80231		Transaction ID : SE24.747 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	$\overline{}$	M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 16 2024
Name of Federal Candidate:		X Support	Office	e Sought: House District: 45
STEEL, MICHELLE, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		1074401.97		rsement For: Primary X General
Per Election for Office Sought	7 - 1 - 1 -	1074401.97	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				113816.25
(b) SUBTOTAL of Unitemized Independent Expenditur	es		. •	
()				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		5 :	M	0 16 2024
Signature		_ Date	e 1	0 10 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400				Amount
City	State	Zip Code		66566.25
DENVER	СО	80231		Transaction ID : SE24.748 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		10 16 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 45
TRAN, DEREK, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		1074401.97	Disbur 2024	sement For: Primary X General
Per Election for Office Sought	7 7	1074401.57	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		79447.50
DENVER	СО	80231		Transaction ID : SE24.749 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	\neg	M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_	10 16 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 41
CALVERT, KEN, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		1277455.72		sement For: Primary X General
Per Election for Office Sought	7 7	1277455.72	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	146013.75
(b) SUBTOTAL of Unitemized Independent Expenditur	es		. ▶	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(a) TOTAL laden and ent Fun and thurse				
(c) TOTAL Independent Expenditures			. ▶	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
Signature		_ Date	e 10	16 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 61 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				G tames
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 2024
Mailing Address 10065 E HARVARD AVE			Δ	mount
STE 400				
City	State	Zip Code		79447.50
DENVER	СО	80231		ransaction ID : SE24.750 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_	10 16 2024
Name of Federal Candidate:		Support	Office S	ought: X House District: 41
ROLLINS, WILL, , ,		Oppose	Pr	resident Senate State: CA
Calendar Year-To-Date		1077455 70		ement For: Primary X General
Per Election for Office Sought	7-1-1-7-	1277455.72	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				10 14 2024
STE 400			A	mount
City	State	Zip Code		51761.25
DENVER	со	80231		Transaction ID : SE24.751
Purpose of Expenditure		Category/		ate of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type		M 10 / D 16 / Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office S	ought: House District: 22
VALADAO, DAVID, , ,		Oppose	Pr	resident Senate State: CA
Calendar Year-To-Date		809994.44	1	ement For: Primary X General
Per Election for Office Sought	7 - 1 - 7 -	003334.44	2024	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures			. •	131208.75
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. ▶ _	
			-	
(c) TOTAL Independent Expenditures			· • L	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y
Signature		_ Date	e 10	16 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C coorsole
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				Amount
STE 400				Amount
City	State	Zip Code		51761.25
DENVER	СО	80231		Transaction ID : SE24.752 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		10 16 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 22
SALAS, RUDY, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		809994.44	Disbur 2024	sement For: Primary X General
Per Election for Office Sought	7 7	000001111	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		63618.75
DENVER	СО	80231		Transaction ID : SE24.753 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 16 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 13
COUGHLIN, KEVIN, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date		1033567.73		sement For: Primary X General
Per Election for Office Sought	7 7	1033307.73	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures .			· •	115380.00
(b) SUBTOTAL of Unitemized Independent Expenditure	əs		. ▶	
(c) TOTAL Independent Expenditures			.	
(c) TOTAL macperiatin Experianties			•	7 7 1 7
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	16 2024

TEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo		f Public Distribution/Dissemination
Mailing Address 10065 E HARVARD AVE				10 14 2024
STE 400			Amoun	t
City	State	Zip Code	─ <u>:</u>	63618.75
DENVER	СО	80231		action ID : SE24.754 f Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought	: X House District:13
SYKES, EMILIA, , ,		Oppose	Preside	OH OH
Calendar Year-To-Date Per Election for Office Sought	7	1033567.73	Disbursement 2024 Ot	For:
Full Name of Payee		☐ Memo	Item Date o	f Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 2024
Mailing Address 10065 E HARVARD AVE			Amoun	†
STE 400			7 1110 011	
City DENVER	State	Zip Code 80231	I	48037.50 action ID : SE24.755
Purpose of Expenditure		Category/	Date o	f Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Type		10 16 2024
Name of Federal Candidate:		X Support	Office Sought	: X House District:09
MERRIN, DERRICK, , ,		Oppose	Preside	nt Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 7	832697.30	Disbursement 2024 Ot	For:
(a) SUBTOTAL of Itemized Independent Expenditures			-	111656.25
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized	•		•
GOBER, CHRIS, , ,		5 :	M = M /	16 2024
Signature		_ Date	10	2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		48037.50
DENVER	CO	80231	I	Transaction ID : SE24.756 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/	пl	10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OFERATIONS		Туре		10 10 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 09
KAPTUR, MARCY, , ,		Oppose	F	President Senate State: OH
Calendar Year-To-Date		832697.30	1	sement For: Primary X General
Per Election for Office Sought	7	002037.30	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				
STE 400				Amount
City	State	Zip Code		136400.00
DENVER	со	80231		Transaction ID : SE24.731 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре	\perp	10 16 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 07
BARRETT, TOM, , ,		Oppose	F	President Senate State: MI
Calendar Year-To-Date		576598.00	1	sement For: Primary X General
Per Election for Office Sought	7	070000.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures .			. 🕨	184437.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• ▶	
(a) TOTAL Independent Evpenditures				
(c) TOTAL Independent Expenditures	•••••		•	7 7 7
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,			M = 1	M / D D / Y Y Y Y Y
Signature		Date	e 10	16 2024

PAGE 65 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee BLITZ CANVASSING LLC 14 2024 Mailing Address 10065 E HARVARD AVE Amount **STE 400** City State Zip Code 136400.00 **DENVER** CO 80231 Transaction ID: SE24.732 Date of Disbursement or Obligation Purpose of Expenditure Category/ CANVASSING/FIELD OPERATIONS 10 2024 Type 07 Name of Federal Candidate: Support Office Sought: X House District: HERTEL, CURTIS, , , MI Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 576598.00 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item BLITZ CANVASSING LLC 2024 14 Mailing Address 10065 E HARVARD AVE Amount STE 400 136400.00 City State Zip Code **DENVER** Transaction ID: SE24.733 CO 80231 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 CANVASSING/FIELD OPERATIONS Type Name of Federal Candidate: 80 X Support X House Office Sought: District: JUNGE, PAUL, , , MI Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 576080.00 2024 Per Election for Office Sought Other (specify) ▶ 272800.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 16 10 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 66 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
7 11101100 1 7 10				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination
BLITZ CANVASSING LLC				M 10
Mailing Address 10065 E HARVARD AVE			Amo	ount
STE 400	State	Zip Code	— Г	136400.00
DENVER	CO	80231	Tra	nsaction ID : SE24.734
Purpose of Expenditure			Date	e of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		10 16 2024
Name of Federal Candidate:		Support	Office Sou	ght: X House District:08
MCDONALD, KRISTEN, , ,		Oppose		ident Senate State: MI
Calendar Year-To-Date			Disbursem	ent For: Primary X General
Per Election for Office Sought	7-1-1-7-	576080.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE				10 14 2024
STE 400			Amo	ount
City	State	Zip Code	— F	136400.00
DENVER	со	80231		insaction ID : SE24.735 e of Disbursement or Obligation
Purpose of Expenditure		Category/		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_ _	10 10 2024
Name of Federal Candidate:		Support	Office Sou	ght: K House District: 10
JAMES, JOHN, , ,		Oppose	Pres	ident Senate State: MI
Calendar Year-To-Date		574006.00	Disbursem	ent For: Primary X General
Per Election for Office Sought	7 7	374000.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. . []	272800.00
				, , , , , , , , , , , , , , , , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		· • [_]	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y
Signature		_ Date	9 10	16 2024

TIEMIZED INDEFENDENT EXPENDITORES			PAGE 67 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee BLITZ CANVASSING LLC		☐ Memo	M M / D D / Y Y Y Y
Mailing Address 10065 E HARVARD AVE			10 14 2024 Amount
STE 400			
City DENVER	State	Zip Code 80231	136400.00 Transaction ID : SE24.736
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 10
MARLINGA, CARL, , ,		Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	574006.00	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
BLITZ CANVASSING LLC			10 14 2024
Mailing Address 10065 E HARVARD AVE STE 400			Amount
City	State	Zip Code	711485.65
DENVER	СО	80231	Transaction ID : SE24.737 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type	10 / 16 / Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	S		. ▶ 847885.65
(b) SUBTOTAL of Unitemized Independent Expenditu	res		·
(c) TOTAL Independent Expenditures			· •
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•	• • • • • • • • • • • • • • • • • • • •
GOBER, CHRIS, , ,		Date	e 10 16 2024
Signature		_ Date	5 10 10 2027

TEMIZED INDEPENDENT EXPENDITURES				PAGE 68 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
7				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
BLITZ CANVASSING LLC				10 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 10065 E HARVARD AVE			۸۳	acust .
STE 400				nount
City	State	Zip Code		711485.65
DENVER	CO	80231		ansaction ID : SE24.738 Ite of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: House District: 00
HARRIS, KAMALA, , ,		Support Oppose	X Pre	• 🗀
		Д оррозс		
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburser 2024	ment For:
Full Name of Payee		☐ Memo	Item Da	ite of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161				10 01 2024
PO BOX 161			An	nount
City	State	Zip Code	— I	24563.25
HUDSON	WI	54016		ransaction ID: SE24.373 tte of Disbursement or Obligation
Purpose of Expenditure		Category/		10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
MESSAGE PHONE CALLS		Type		10 01 2024
Name of Federal Candidate:		X Support	Office So	ought: X House District: 00
BEGICH, NICK, , ,		Oppose	Pre	esident Senate State: AK
Calendar Year-To-Date		indenda.	Disburser	ment For: Primary X General
Per Election for Office Sought	7	402336.21	2024	Other (specify) ▶
			l.	
(a) SUBTOTAL of Itemized Independent Expenditures			[736048.90
				7
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(c) TOTAL Independent Expenditures			•	
				, , , , , , , , , , , , , , , , , , , ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CORER CURIS			M = M	/ D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	10	16 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 69 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161			Ar	mount
City	State	Zip Code		1066.80
HUDSON	WI 54016			ransaction ID : SE24.374
Purpose of Expenditure		Category/	D	ate of Disbursement or Obligation
MESSAGE PHONE CALLS		Type		10 01 2024
Name of Federal Candidate:		X Support	Office So	ought: X House District: 41
CALVERT, KEN, , ,		Oppose	Pre	esident Senate State: CA
Calendar Year-To-Date		4077455 70		ment For: Primary X General
Per Election for Office Sought	7 7	1277455.72	2024	Other (specify) ▶
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161				10 0. 252.
			Ar	mount
City	State	Zip Code		10045.70
HUDSON	WI	54016		ransaction ID : SE24.375 ate of Disbursement or Obligation
Purpose of Expenditure	-1	Category/		M M / D D / Y Y Y
MESSAGE PHONE CALLS		Type	_ _	10 01 2024
Name of Federal Candidate:		X Support	Office So	ought: X House District: 08
EVANS, GABE, , ,		Oppose	Pre	esident Senate State: CO
Calendar Year-To-Date		407249.92		ment For: Primary X General
Per Election for Office Sought	7 7	407218.83	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	11112.50
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		. ▶	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	e 10	01 2024
Signature				

TEMIZED INDEPENDENT EXPENDITURES				PAGE 70 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u> </u>
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ae				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161			Amo	unt
City	State	Zip Code	$-\Gamma$	9783.20
HUDSON	WI	54016		saction ID : SE24.376 of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS	I	Category/ Type		10 01 2024
Name of Federal Candidate:		N Commont	Office Cours	uht. Villauga Diatriat. 03
NUNN, ZACH, , ,		Support Oppose	Office Soug	Int. House District.
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought		402525.90	2024	Other (specify)
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
CONNECTION STRATEGY LLC			- 1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161				10 01 2024
PO BOX 161			Amo	unt
City	State	Zip Code	$-\Gamma$	4690.70
HUDSON	WI	54016		nsaction ID : SE24.377 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
MESSAGE PHONE CALLS		Type	_	10 01 2024
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 02
THERIAULT, AUSTIN, , ,		Oppose	Presid	dent Senate State: ME
Calendar Year-To-Date		772692 42	Disburseme	ent For: Primary X General
Per Election for Office Sought	7 7	772683.43	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	14473.90
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures				
(-,				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		5	M = M /	01 2024
Signature		_ Date	10	2024

TEMIZED INDEFENDENT EXPENDITORES			PAGE 71 OF 2 FOR LINE 24 OF FORM	224 M 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBE	
America PAC			C C00879510	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y	Y
Full Name of Payee CONNECTION STRATEGY LLC		☐ Memo	Item Date of Public Distribution/Dissemination	Y
Mailing Address PO BOX 161			Amount	
City	State	Zip Code	2638.3	0
HUDSON	WI	54016	Transaction ID : SE24.378 Date of Disbursement or Obligation	
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type	10 01 7 2024	
Name of Federal Candidate:			Office Sought: House District:	02
BACON, DON, , ,		Oppose	President Senate State:	NE
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	328882.56	Disbursement For: ☐ Primary ☐ Ger 2024 ☐ Other (specify) ▶	neral
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Disseminati	ion
CONNECTION STRATEGY LLC			10 01 2024	Y
Mailing Address PO BOX 161			Amount	
City	State	Zip Code	8906.8	0
HUDSON	WI	54016	Transaction ID : SE24.379 Date of Disbursement or Obligation	
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type	10 01 7 2024	
Name of Federal Candidate:		Support	Office Sought: X House District:	07
KEAN, TOM, , ,		Oppose		NJ
Calendar Year-To-Date Per Election for Office Sought	7 7	762074.77	Disbursement For: ☐ Primary ☐ Ger 2024 ☐ Other (specify) ▶	neral
(a) SUBTOTAL of Itemized Independent Expenditures			▶ 11545.10	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		>	
(c) TOTAL Independent Expenditures			·	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized	•	• • •	
GOBER, CHRIS, , ,		_	M - M / D - D / Y - Y - Y - Y - Y - Y - Y - Y - Y - Y	
Signature		_ Date	e 10 01 2024	

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
711101104 1 710				C C00879510
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee CONNECTION STRATEGY LLC		Memo	Item Date	e of Public Distribution/Dissemination
Mailian Address				10 01 7 2024
PO BOX 161			Amo	ount
City	State	Zip Code	-	9327.50
HUDSON	WI	54016		nsaction ID : SE24.380 of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 02
HERRELL, YVETTE, , ,		Oppose	Presi	NIM
Calendar Year-To-Date Per Election for Office Sought	7	395244.03	Disburseme 2024	ent For:
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161				10 01 2021
1 6 26% 161			Amo	punt
City	State	Zip Code		6859.30
HUDSON	WI	54016		nsaction ID : SE24.381 of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type		10 01 Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: X House District: 09
MERRIN, DERRICK, , ,		Oppose	Presi	
Calendar Year-To-Date		832697.30	Disburseme	ent For: Primary X General
Per Election for Office Sought	7-1-1-5	002007.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	\$			16186.80
			, L	
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • [
(c) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M M M	01 2024
Signature		Date	3 10	2027

TEMIZED INDEFENDENT EXPENDITORES			PAGE 73 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y
Full Name of Payee CONNECTION STRATEGY LLC		☐ Memo	Item Date of Public Distribution/Dissemination
Mailing Address PO BOX 161			Amount
City	State	Zip Code	888.30
HUDSON	WI	54016	Transaction ID : SE24.382 Date of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type	10 01 7 2024
Name of Federal Candidate:		Support	Office Sought: House District: 03
KENT, JOE, , ,		Oppose	President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	635211.89	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
CONNECTION STRATEGY LLC			10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161			Amount
City	State	Zip Code	204004.14
HUDSON	WI	54016	Transaction ID : SE24.502 Date of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type	10 07 7 2024
Name of Federal Candidate:		Support	Office Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursement For: Primary General 2024 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			204892.44
(b) SUBTOTAL of Unitemized Independent Expenditu	res		
,			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	• • • •
CORER CHRIS			M M / D D / Y Y Y Y
GOBER, CHRIS, , ,		_ Date	9 10 01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 74 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ac				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161				Amount
City	State	Zip Code		368908.91
HUDSON	WI	54016		Transaction ID : SE24.629
Purpose of Expenditure			_	Date of Disbursement or Obligation
MESSAGE PHONE CALLS		Category/ Type		10 11 2024
Name of Federal Candidate:		Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbur	sement For: Primary X General
Tot Election for Office Sought	7 7			Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161				Amount
City	Ctoto	Zin Codo		110384.49
City HUDSON	State	Zip Code 54016		Transaction ID : SE24.695
Purpose of Expenditure		Category/		Date of Disbursement or Obligation
MESSAGE PHONE CALLS		Type		10 15 2024
Name of Federal Candidate:		X Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date		-indexion in	Disbur	sement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				479293.40
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures				
			·	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y
Signature		_ Date	10	11 2024

TILIMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee CONNECTION STRATEGY LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address PO BOX 161			Amour	لىنىا لىا ك
City	State	Zip Code	— r	344879.07
HUDSON	WI	54016		action ID : SE24.696 of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type	M	10 15 / Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	t: House District:00
TRUMP, DONALD, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursemen 2024 O	t For:
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
CONNECTION STRATEGY LLC			N N	10 14 Y Y Y Y Y Y Y
Mailing Address PO BOX 161			Amou	nt
City	State	Zip Code	<u> П</u>	7784.76
HUDSON	WI	54016		saction ID : SE24.701 of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type	N	10 / 15 / Y Y 2024
Name of Federal Candidate:		Support	Office Sough	t: X House District: 41
CALVERT, KEN, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7	1277455.72	Disbursemen 2024 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditures			.	352663.83
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
GOBER, CHRIS, , ,		_	M M /	15 2024
Signature		_ Date	10	15 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 76 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 600073310
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 14 2024
Mailing Address PO BOX 161				Amount
City	State	Zip Code		7784.76
HUDSON	WI	54016		Transaction ID : SE24.702
Purpose of Expenditure		Category/	$\overline{}$	Date of Disbursement or Obligation
MESSAGE PHONE CALLS		Type		10 15 2024
Name of Federal Candidate:		Support	Office	Sought:
ROLLINS, WILL, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		1277455.72	Disbu 2024	rsement For: Primary X General
Per Election for Office Sought	7 1 7	1277 100172	2024	Other (specify) ▶
Full Name of Payee CONNECTION STRATEGY LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 / 14 / Y Y Y Y Y Y
Mailing Address PO BOX 161				Amount
City	State	Zip Code		3534.81 Transaction ID : SE24.703
HUDSON	WI	54016		Date of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type		10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: X House District: 02
BACON, DON, , ,		Oppose	l	President Senate State: NE
Calendar Year-To-Date				rsement For: Primary X General
Per Election for Office Sought	7	328882.56	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				11319.57
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 77 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ac				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 161			Ar	nount
Ou	0	7: 0 1	— г	2524.04
City	State	Zip Code 54016		3534.81 ransaction ID : SE24.704
HUDSON	WI	34016		ate of Disbursement or Obligation
Purpose of Expenditure MESSAGE PHONE CALLS		Category/ Type		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: X House District: 02
VARGAS, TONY, , ,		Support Oppose	l	NE
, , , , , , , , , , , , , , , , , , , ,		Д оррозс		esiderii Seriale State.
Calendar Year-To-Date Per Election for Office Sought	, , , ,	328882.56	Disburse 2024	ment For:
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
CONNECTION STRATEGY LLC				10 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO POY 161				10 15 2024
PO BOX 161			Ar	nount
City	State	Zip Code	— Г	163341.60
HUDSON	WI	54016		ransaction ID : SE24.705 ate of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y
MESSAGE PHONE CALLS		Type		15 2024
Name of Federal Candidate:		X Support	Office So	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date		alaska kari	Disburse	ment For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			Г	166876.41
			_	
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
				, , , , , , , , , , , , , , , , , , , ,
(c) TOTAL Independent Expenditures			. •	
				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GODED GUDE			M = M	/ D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	9 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 78 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ao				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		78926.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.383 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		Man / Dad / Yayayay
CANVASSING/FIELD OPERATIONS		Type		10 01 2024
Name of Federal Candidate:		X Support	Office	Sought: X House District: 19
MOLINARO, MARCUS, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		669321.34	Disbu 2024	rrsement For: Primary X General
Tel Election for Office Sought	7 7			Other (specify) ▶
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Austral
				Amount
City	State	Zip Code		78926.00
ALEXANDRIA	VA	22034		Transaction ID: SE24.384 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	\neg	10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 01 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 19
RILEY, JOSH, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date		000004-04	1	rsement For: Primary X General
Per Election for Office Sought	7-1-1-5-	669321.34	2024	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				157852.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures				
(c) TOTAL Independent Experiorities			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		5 .	M	0 01 2024
Signature		_ Date) 10	0 01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 79 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item [Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC		_		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET			A	Amount
City	State	Zip Code		41743.35
ALEXANDRIA	VA	22034		Fransaction ID : SE24.385 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		10 01 2024
Name of Federal Candidate:		X Support	Office S	Sought: X House District:03
NUNN, ZACH, , ,		Oppose	P	resident Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	4	402525.90	Disburs 2024	ement For: Primary X General Other (specify) ▶
Full Name of Payee		□ Mama	Itam [Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC		∐ Memo	item	
Moiling Address				09
Mailing Address 3700 DUKE STREET			A	Amount
City	State	Zip Code		41743.35
ALEXANDRIA	VA	22034		Transaction ID : SE24.386 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 01 2024
Name of Federal Candidate:		Support	Office S	Sought:
BACCAM, LANON, , ,		Oppose	P	resident Senate State: IA
Calendar Year-To-Date		402525 00		ement For: Primary X General
Per Election for Office Sought	7-1-1-5-	402525.90	2024	Other (specify) ▶
·				
(a) SUBTOTAL of Itemized Independent Expenditures				83486.70
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· • [
(c) TOTAL Independent Expenditures			. [
(-)				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y
Signature		_ Date	10	01 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 80 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		41021.25
ALEXANDRIA	VA	22034		Transaction ID : SE24.387 Date of Disbursement or Obligation
Purpose of Expenditure	<u> </u>	Category/	$\overline{}$	M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 01 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 08
EVANS, GABE, , ,		Oppose		President Senate State: CO
Calendar Year-To-Date		407249.92		rsement For: Primary X General
Per Election for Office Sought	7 7	407218.83	2024	Other (specify) ►
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				
				Amount
City	State	Zip Code		41021.25
ALEXANDRIA	VA	22034		Transaction ID : SE24.388 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 01 2021
Name of Federal Candidate:		Support	Office	Sought: House District:08
CARAVEO, YADIRA, , ,		Oppose		President Senate State: CO
Calendar Year-To-Date		407218.83	1	rsement For: Primary X General
Per Election for Office Sought	7 7	407210.03	2024	Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures			. •	82042.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(a) TOTAL lades and ant Fire and itures				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M =	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	01 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 81 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address 3700 DUKE STREET			L	09 30 2024
			Amou	nt
City	State	Zip Code	-	42919.80
ALEXANDRIA	VA	22034		saction ID : SE24.389 of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 01 2024
Name of Federal Candidate:			Office Sough	nt: X House District: 02
BACON, DON, , ,		Oppose	Presid	NE
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	328882.56	Disbursemer	
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC		weme	TOTAL DESIGNATION OF THE PROPERTY OF THE PROPE	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET			Amou	لىنى لىا لت
	1-	T = -		
City ALEXANDRIA	State	Zip Code 22034	Trans	42919.80 saction ID : SE24.390
Purpose of Expenditure		Cotomonil		of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type	L	10 01 2024
Name of Federal Candidate:		Support	Office Sough	nt: X House District: 02
VARGAS, TONY, , ,		Oppose	Presid	NE
Calendar Year-To-Date Per Election for Office Sought	7	328882.56	Disbursemer	nt For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	·		• .	85839.60
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	.,,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M /	01 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 82 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C Coodrasto
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		122418.20
ALEXANDRIA	VA	22034		Transaction ID : SE24.391 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 01 2024
Name of Federal Candidate:		X Support	Office	Sought: Mouse District: 07
KEAN, TOM, , ,		Oppose		President Senate State: NJ
Calendar Year-To-Date		762074.77	Disbu 2024	rsement For: Primary X General
Per Election for Office Sought	7 1 7	7777	2024	Other (specify) ▶
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
				M 09 / D 30 / Y 2024
Mailing Address 3700 DUKE STREET				Amount
	Ta	T = .		
City ALEXANDRIA	State	Zip Code		122418.20 Transaction ID : SE24.392
	VA	22034		Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: X House District:07
ALTMAN, SUE, , ,		Oppose		President Senate State: NJ
Calendar Year-To-Date			Disbu	rsement For: Primary X General
Per Election for Office Sought	1 1	762074.77	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				244836.40
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(a) TOTAL Index and ant Fire and thurse				
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 83 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ao				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		50000.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.393 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type	_	10 01 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburs 2024	sement For: Primary X General
To Essential States Codgill	7			Other (specify) ▶
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
				M 09 / D 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		50000.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.394 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 01 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date	40	5.45770.4.00	1	sement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				100000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	es		• •	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10	01 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				
				Amount
City	State	Zip Code		125000.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.565 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 09 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82		rsement For: Primary X General
Per Election for Office Sought	7	3437794.82	2024	Other (specify) >
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				
				Amount
City	State	Zip Code		125000.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.566 Date of Disbursement or Obligation
Purpose of Expenditure	L	Category/	\neg	M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Туре		10 09 2024
Name of Federal Candidate:		Support	Office	Sought: House District:00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82	1	rsement For: Primary X General
Per Election for Office Sought	1	3437734.02	2024	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				250000.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es		. •	
(a) TOTAL Independent Evpanditures				
(c) TOTAL Independent Expenditures	•••••			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M =	M / D D / Y Y Y Y
Signature		_ Date	e 10	09 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 85 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u> </u>
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ao				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
ECHO CANYON CONSULTING LLC				10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		1000000.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.627
Purpose of Expenditure		Catagony	_	Date of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		10 11 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbu 2024	rsement For: Primary General
	1			Other (specify)
Full Name of Payee ECHO CANYON CONSULTING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
				10 / 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3700 DUKE STREET				Amount
City	State	Zip Code		1000000.00
ALEXANDRIA	VA	22034		Transaction ID : SE24.628 Date of Disbursement or Obligation
Purpose of Expenditure	I	Category/	\neg	M M / D D / Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 11 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	40	5457704.00		rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	2000000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	es		•	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		-	M	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	0 11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 86 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ae				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Am	ount
	0	7. 0. 1	— г	20750.00
City	State	Zip Code		22750.00
ARLINGTON	VA	22210		Insaction ID : SE24.397 te of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:				usht. House District. 00
TRUMP, DONALD, , ,		Support	Office Sou	agni
TROWF, DONALD, , , ,		Oppose	X Pres	
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursen 2024	nent For:
Full Name of Payee		Memo	Item Dat	te of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC		_ weme	nom	
Mailing Address				10 01 / 2024
Mailing Address PO BOX 101552			Am	ount
City	State	Zip Code	— г	22750.00
ARLINGTON	VA	22210		ansaction ID : SE24.398 te of Disbursement or Obligation
Purpose of Expenditure		Category/	Dai	M M / D D / Y Y Y
DIGITAL MEDIA		Type		10 01 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date			Disbursen	nent For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
L				
(a) SUBTOTAL of Itemized Independent Expenditures				45500.00
			_	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	7 7
(a) TOTAL landers and out Fune and thurse				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GORER CHRIS			M = M	/ D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		Date	10	01 2024

TEMIZED INDEFENDENT EXPENDITORES				PAGE 87 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
Allielica FAO				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on Man / Dad / Yayayay
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				Amount
City	State	Zip Code		132232.50
ARLINGTON	VA	22210		Transaction ID : SE24.399 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y
DIGITAL MEDIA		Type	ᆜᆜ	10 01 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disbur 2024	rsement For: Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				
				Amount
City	State	Zip Code		132232.50
ARLINGTON	VA	22210		Transaction ID : SE24.400 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support		Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	05457794.82	Disbur 2024	rsement For: Primary K General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
		_	_	
(a) SUBTOTAL of Itemized Independent Expenditures	i		. •	264465.00
			ſ	
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. •	
(c) TOTAL Independent Expenditures				
				7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		• • • • • • • • • • • • • • • • • • • •
GOBER, CHRIS, , ,		Date	M = 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 88 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 2000/3310
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 01 / Y Y Y Y
Mailing Address PO BOX 101552				Amount
City	State	Zip Code		162589.00
ARLINGTON	VA	22210		Transaction ID : SE24.401 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
N (5 1 10 51)			$-\bot$	
Name of Federal Candidate:		Support		Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbur 2024	sement For: Primary General Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				10 01 2024
1 0 20% 101002				Amount
City	State	Zip Code		201597.00
ARLINGTON	VA	22210		Transaction ID : SE24.402 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		10 01 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82		sement For: Primary X General
Per Election for Office Sought	7	0 10 7 0 1.02	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶	364186.00
(h) CURTOTAL of Unitamized Independent Evrenditus	***			
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GORER CHRIS			M	M / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 89 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			An	nount
City	State	Zip Code		324456.00
ARLINGTON	VA	22210		ansaction ID : SE24.513 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Type	_	10 08 2024
Name of Federal Candidate:		X Support	Office Sc	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date		desire desire	Disburse	ment For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				10 08 2024
PO BOX 101332			An	nount
City	State	Zip Code		259733.50
ARLINGTON	VA	22210		ransaction ID : SE24.514 ate of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Type		10 09 2024
Name of Federal Candidate:		Support	Office Sc	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date		5 45 770 4 00	Disburse	ment For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				584189.50
				, , , , , , , , , , , , , , , , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. ▶	
(c) TOTAL Independent Expenditures			· • _	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CODED CHDIS			M = M	/ D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		Date	e 10	08 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 333373
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				
				Amount
City	State	Zip Code		259733.50
ARLINGTON	VA	22210		Transaction ID : SE24.515 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		10 09 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82		rsement For: Primary General
Per Election for Office Sought	7	3437794.62	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				
				Amount
City	State	Zip Code		191448.00
ARLINGTON	VA	22210		Transaction ID : SE24.516 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		10 09 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82	1	rsement For: Primary X General
Per Election for Office Sought	10	3437794.62	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				451181.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Expenditures			•	
Under panelty of parium Learlify that the independen	nt ovnandituraa	raparted barain wara	not me	ada in accoration, consultation, or concert
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	09 2024

Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				-	PAGE 9°	OF 224 24 OF FORM 3X
NAME OF COMMITTEE (In Full)						ION NUMBER ▼
America PAC				C	C0087951	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M /	D 0 /	YYYY
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	Item Da	te of Public	Distribution 08	n/Dissemination 2024
Mailing Address PO BOX 101552			Am	nount		
City	State	Zip Code	-			191448.00
ARLINGTON	VA	22210		ansaction II te of Disbur		
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10	09	2024
Name of Federal Candidate:		Support	Office So	ught:	House	District:00
HARRIS, KAMALA, , ,		Oppose	X Pre	_	Senate	State:
Calendar Year-To-Date Per Election for Office Sought	, 10	5457794.82	Disburser 2024	nent For:	Primai	ry X General
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	Item Da	te of Public	Distribution 08	n/Dissemination
Mailing Address PO BOX 101552			Am	nount	00	2024
City	State	Zip Code	— Г			24810.00
ARLINGTON	VA	22210		ansaction I te of Disbur		53
Purpose of Expenditure		Category/		M M /	D D	YYYY
DIGITAL MEDIA		Туре		10	09	2024
Name of Federal Candidate:		X Support	Office So	ught: 🔀	House	District:02
HERRELL, YVETTE, , ,		Oppose	Pre	sident	Senate	State: NM
Calendar Year-To-Date Per Election for Office Sought	7	395244.03	Disburser 2024	nent For:	Primaı	y X General
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure						216258.00
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized	•			•	
GODED GUDYS			M = M	/ D = D	/ Y Y	YY
GOBER, CHRIS, , ,		_ Date	10	09		24

TEMIZED INDEPENDENT EXPENDITURES				PAGE 92 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 101552				10 08 7 2024
7 5 2 5 1 7 3 7 5 2 5 1				Amount
City	State	Zip Code		24810.00
ARLINGTON	VA	22210		Transaction ID : SE24.554 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 09 7 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 02
VASQUEZ, GABRIEL , , ,		Oppose		President Senate State: NM
Calendar Year-To-Date			Disbu	rsement For: Primary X General
Per Election for Office Sought		395244.03	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				M M / D D / Y Y Y
Mailing Address DO DOV 404550				10 08 2024
PO BOX 101552				Amount
City	State	Zip Code		21693.50
ARLINGTON	VA	22210		Transaction ID : SE24.555 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type		10 03 2024
Name of Federal Candidate:		X Support	Office	e Sought: House District:08
EVANS, GABE, , ,		Oppose		President Senate State: CO
Calendar Year-To-Date		407249 92	1	ırsement For: Primary X General
Per Election for Office Sought	7-1-1-5-	407218.83	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				46503.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(a) TOTAL ladanandant Funanditura				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CODED CUDIS			М	M / D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 1	0 09 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 93 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address PO BOX 101552			- L	10 08 2024
			Amou	nt
City	State	Zip Code		21693.50
ARLINGTON	VA	22210		saction ID : SE24.556 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 09 2024
Name of Federal Candidate:		Support	Office Sough	nt: X House District: 08
CARAVEO, YADIRA, , ,		Oppose	Preside	
Calendar Year-To-Date		407218.83	Disbursemer	
Per Election for Office Sought	7 7	.0.12.0.00	C	Other (specify) -
Full Name of Payee FULL REACH MEDIA GROUP LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address PO POV 101552			— L	10 08 2024
PO BOX 101552			Amou	nt
City	State	Zip Code	$-\Gamma$	26929.00
ARLINGTON	VA	22210	Trans	saction ID : SE24.557 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 09 2024
Name of Federal Candidate:		X Support	Office Sough	nt: X House District:00
BEGICH, NICK, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	A A	402336.21	Disbursemer	nt For: Primary
	,			
(a) SUBTOTAL of Itemized Independent Expenditures			.	48622.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. —	
(2) 2021211201011120111100000110011120111001				<u></u>
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M /	09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				10 00 2024
				Amount
City	State	Zip Code		26929.00
ARLINGTON	VA	22210		Transaction ID : SE24.558 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Type		10 09 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
PELTOLA, MARY, , ,		Oppose		President Senate State: AK
Calendar Year-To-Date		402226 24		rsement For: Primary X General
Per Election for Office Sought	7 7	402336.21	2024	Other (specify) >
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				
				Amount
City	State	Zip Code		33879.00
ARLINGTON	VA	22210		Transaction ID : SE24.559
Purpose of Expenditure		Category/	\neg	Date of Disbursement or Obligation
DIGITAL MEDIA		Type		10 09 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 17
LAWLER, MIKE, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date		1411214.06		rsement For: Primary X General
Per Election for Office Sought	T-1-T-	1411214.06	2024	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				60808.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidat party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			М	M / D D / Y Y Y Y
Signature		_ Date	e 10	09 2024

TEMIZED INDEPENDENT EXPENDITORES				PAGE 95 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Am	punt
City	State	Zip Code	-	33879.00
ARLINGTON	VA	22210		nsaction ID : SE24.560 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M - M / D - D / Y - Y - Y - Y
DIGITAL MEDIA		Туре		10 09 2024
Name of Federal Candidate:		Support	Office Sou	ight: X House District: 17
JONES, MONDAIRE, , ,		Oppose	Pres	sident Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	, , ,	1411214.06	Disbursem 2024	ent For: ☐ Primary ☐ General Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552			Am	ount
				
City	State	Zip Code		14519.50
ARLINGTON	VA	22210	I	ansaction ID : SE24.561 e of Disbursement or Obligation
Purpose of Expenditure		Category/		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type		10 09 2024
Name of Federal Candidate:		X Support	Office Sou	ight: X House District:02
BACON, DON, , ,		Oppose	Pres	sident Senate State: NE
Calendar Year-To-Date		328882.56	Disbursem	ent For: Primary X General
Per Election for Office Sought	7-1-1-5-	320002.30	2024	Other (specify)
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			• •	48398.50
(b) SUBTOTAL of Unitemized Independent Expenditur	es		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 .	M M	09 2024
Signature		_ Date	e 10	2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 96 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				Amount
City	State	Zip Code		14519.50
ARLINGTON	VA	22210		Transaction ID : SE24.562 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	\neg	M M / D D / Y Y Y
DIGITAL MEDIA		Type		10 09 2024
Name of Federal Candidate:		Support	Office	Sought:
VARGAS, TONY, , ,		Oppose		President Senate State: NE
Calendar Year-To-Date		328882.56		rsement For: Primary X General
Per Election for Office Sought	7 7	320002.30	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 08 7 2024
Mailing Address PO BOX 101552				Amount
				Amount
City	State	Zip Code		31320.50
ARLINGTON	VA	22210		Transaction ID : SE24.563 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Туре		
Name of Federal Candidate:		Support	Office	Sought: House District: 19
MOLINARO, MARCUS, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date		669321.34	Disbu 2024	rsement For: Primary K General
Per Election for Office Sought	7 1 1 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	45840.00
(1) OUDTOTAL (1) 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures				
(,,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M =	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	09 2024

PAGE 97 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee FULL REACH MEDIA GROUP LLC 08 2024 Mailing Address PO BOX 101552 Amount City State Zip Code 31320.50 **ARLINGTON** VA 22210 Transaction ID: SE24.564 Date of Disbursement or Obligation Purpose of Expenditure Category/ **DIGITAL MEDIA** 10 09 2024 Type Name of Federal Candidate: 19 X House Support Office Sought: District: RILEY, JOSH, , , NY Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 669321.34 2024 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item FULL REACH MEDIA GROUP LLC 13 2024 Mailing Address PO BOX 101552 Amount 2892.00 City State Zip Code Transaction ID: SE24.693 **ARLINGTON** V٨ 22210 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 15 **TEXTING** Type Name of Federal Candidate: X Support Office Sought: House District: TRUMP, DONALD, , , X President Oppose Senate State: X General Disbursement For: Primary Calendar Year-To-Date 105457794.82 2024 Per Election for Office Sought Other (specify) ▶ 34212.50 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 09 2024 10 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 98 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ac				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
FULL REACH MEDIA GROUP LLC				10 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 101552				Amount
City	State	Zip Code		324456.00
ARLINGTON	VA	22210		Transaction ID : SE24.722 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type		10 16 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date				ement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address DO DOV 409				09 30 2024
PO BOX 408			A	Amount
City	State	Zip Code		18339.83
BAYVILLE	NJ	08721		Transaction ID : SE24.419
Purpose of Expenditure		Category/		Date of Disbursement or Obligation
PRINTING/POSTAGE		Type		10 01 2024
Name of Federal Candidate:		X Support	Office S	Sought: X House District:17
LAWLER, MIKE, , ,		Oppose	P	resident Senate State: NY
Calendar Year-To-Date		Name and Address	Disburs	ement For: Primary X General
Per Election for Office Sought	7-1-1-7-	1411214.06	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			[342795.83
(b) SUBTOTAL of Unitemized Independent Expenditure	œs			
(c) TOTAL Independent Expenditures			•	
				, ,
Under penalty of perjury I certify that the independe				
with, or at the request or suggestion of, any candidate party committee) any political party committee or its		committee or agent of	of either,	or (if the reporting entity is not a political
, , , , , , , , , , , , , , ,	J =			
GOBER, CHRIS, , ,			M	/ DDD / YTYTY Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10	16 2024

TEMIZED INDEPENDENT EXPENDITORES				PAGE 99 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408			Ar	mount
City	State	Zip Code		18339.83
BAYVILLE	NJ	08721	I	ransaction ID : SE24.420 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		10 01 2024
Name of Federal Candidate:		Support	Office So	ought: X House District: 17
JONES, MONDAIRE, , ,		Oppose	Pre	esident Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	, , ,	1411214.06	Disburse 2024	ment For:
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				09 30 / 2024
Mailing Address PO BOX 408			Δr	mount
City	State	Zip Code	١Ļ	17757.32
BAYVILLE	NJ	08721		ransaction ID : SE24.421 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		10 01 2024
Name of Federal Candidate:		X Support	Office So	ought: House District: 19
MOLINARO, MARCUS, , ,		Oppose	Pre	esident Senate State: NY
Calendar Year-To-Date		669321.34		ment For: Primary X General
Per Election for Office Sought	7 7	000021101	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• •	36097.15
(b) SUBTOTAL of Unitemized Independent Expenditur	'es		[
(3, 332 13 11 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1				7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 -	M = M	01 2024
Signature		_ Date	9 10	01 2024

TEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item Date	te of Public Distribution/Dissemination
Mailing Address PO BOX 408			Am	09 30 2024 nount
City State	e	Zip Code	— Г	17757.31
BAYVILLE	NJ	08721	I	ansaction ID : SE24.422 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 01 7 2024
Name of Federal Candidate:		Support	Office So	ught: X House District: 19
RILEY, JOSH, , ,		∑ Oppose		sident Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	,	669321.34	Disbursen 2024	nent For: Primary
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				M 09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408			Am	ount
City State	e	Zip Code		11263.35
BAYVILLE	NJ	08721		ansaction ID : SE24.423 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 01 2024
Name of Federal Candidate:		X Support	Office Sor	ught: X House District: 02
BACON, DON, , ,		Oppose	l —	sident Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7	328882.56	Disbursen 2024	nent For: ☐ Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			.	29020.66
(b) SUBTOTAL of Unitemized Independent Expenditures			•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent	authorized	•		• • •
GOBER, CHRIS, , ,		5	M M M	/ 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10	2024

TEMIZED INDEPENDENT EXPENDITORES				PAGE 101 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408			A	mount
City	State	Zip Code		11263.35
BAYVILLE	NJ	08721		ransaction ID : SE24.424
Purpose of Expenditure		Category/		ate of Disbursement or Obligation
PRINTING/POSTAGE		Type		10 01 2024
Name of Federal Candidate:		Support	Office S	ought: X House District: 02
VARGAS, TONY, , ,		Oppose		esident Senate State: NE
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	328882.56	Disburse 2024	ement For: Primary X General Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				
			A	mount
City	State	Zip Code		11529.92
BAYVILLE	NJ	08721		Fransaction ID : SE24.425 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		10 04 2024
Name of Federal Candidate:		X Support	Office S	ought: House District: 02
BACON, DON, , ,		Oppose	l Pr	resident Senate State: NE
Calendar Year-To-Date		328882.56	Disburse	ement For: Primary X General
Per Election for Office Sought	7-1-1-7-		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· •	22793.27
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	11212
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	9 10	01 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 102 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 00073310
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	" M / D " D / Y " Y " Y " Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address PO BOX 408			L	10 03 2024
			Amou	nt
City	State	Zip Code		11529.91
BAYVILLE	NJ	08721		saction ID : SE24.426 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 04 7 2024
Name of Federal Candidate:		Support	Office Sough	nt: X House District:02
VARGAS, TONY, , ,		Oppose	Presid	NE
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	328882.56	Disbursemer	
Full Name of Payee		Memo		of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC		_		M M / D D / Y Y Y Y
Mailing Address PO BOX 408				10 04 2024
FO BOX 400			Amou	nt
City	State	Zip Code	ΗГ.	23035.21
BAYVILLE	NJ	08721	Trans	saction ID : SE24.427 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 / 04 / 2024
Name of Federal Candidate:		X Support	Office Sough	nt: X House District:00
BEGICH, NICK, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	402336.21	Disbursemer	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	34565.12
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M /	04

PAGE 103 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee GOLDFINCH PARTNERS LLC 04 2024 Mailing Address PO BOX 408 Amount City State Zip Code 23035.21 **BAYVILLE** NJ 08721 Transaction ID: SE24.428 Date of Disbursement or Obligation Purpose of Expenditure Category/ PRINTING/POSTAGE 10 2024 Type 00 Name of Federal Candidate: X House Support Office Sought: District: PELTOLA, MARY, , , ΑK Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 402336.21 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item GOLDFINCH PARTNERS LLC 2024 Mailing Address PO BOX 408 Amount 18345.17 City State Zip Code Transaction ID: SE24.429 **BAYVILLE** NJ 08721 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 10 PRINTING/POSTAGE Type Name of Federal Candidate: 17 X Support X House Office Sought: District: LAWLER, MIKE, , , NY Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 1411214.06 2024 Per Election for Office Sought Other (specify) ▶ 41380.38 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 04 10 Date Signature

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				M M / D D / Y Y Y
Mailing Address PO BOX 408				10 04 2024
PO BOX 408				Amount
City	State	Zip Code		18345.16
BAYVILLE	NJ	08721		Transaction ID : SE24.430
Purpose of Expenditure				Date of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		10 / 04 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 17
JONES, MONDAIRE, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		1411214.06	Disbu 2024	rsement For: Primary X General Other (specify) ▶
Full Name of Payee		Memo	Itom	Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC		□ Memo	пеш	M M / D D / Y Y Y Y
Mailing Address				10 04 2024
Mailing Address PO BOX 408				Amount
City	State	Zip Code		14319.70
BAYVILLE				Transaction ID : SE24.431
	NJ	08721		Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10
Name of Federal Candidate:		Support	Office	Sought: X House District: 08
EVANS, GABE, , ,		Oppose		President Senate State: CO
Onlandon Venes To Date			Diebu	rsement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought		407218.83	2024	
	, , ,			Other (specify)
(a) OUDTOTAL of the mineral land are and eat Fernandillaness				22004.00
(a) SUBTOTAL of Itemized Independent Expenditures				32664.86
(b) SUBTOTAL of Unitemized Independent Expenditure	96			
(b) GOBTOTAL of Officernized independent Experiental	03			
(c) TOTAL Independent Expenditures				
.,				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,			M =	M / D D / Y Y Y
Signature		_ Date	e 10	04 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 105 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address PO BOX 408			- L	10 04 2024
			Amou	nt
City	State	Zip Code	TL.	14319.69
BAYVILLE	NJ	08721		saction ID : SE24.432 of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 2024
Name of Federal Candidate:		Support	Office Sough	nt: X House District:08
CARAVEO, YADIRA, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7	407218.83	Disbursemer 2024	nt For:
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC		Memo	ntem Bate	10 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				
			Amou	nt
City	State	Zip Code		15804.05
BAYVILLE	NJ	08721	Trans	saction ID : SE24.433 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 04 2024
Name of Federal Candidate:		X Support	Office Sough	nt: X House District:02
HERRELL, YVETTE, , ,		Oppose	Presid	NIM
Calendar Year-To-Date Per Election for Office Sought	7 1 7	395244.03	Disbursemer	nt For:
				· · · · · · · · · · · · · · · · · · ·
(a) SUBTOTAL of Itemized Independent Expenditures			•	30123.74
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M /	04 2024

PAGE 106 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee GOLDFINCH PARTNERS LLC 04 2024 Mailing Address PO BOX 408 Amount City State Zip Code 15804.05 **BAYVILLE** NJ 08721 Transaction ID: SE24.434 Date of Disbursement or Obligation Purpose of Expenditure Category/ PRINTING/POSTAGE 10 2024 Type 02 Name of Federal Candidate: X House Support Office Sought: District: VASQUEZ, GABRIEL, , , NM Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 395244.03 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item GOLDFINCH PARTNERS LLC 2024 Mailing Address PO BOX 408 Amount 18023.88 City State Zip Code Transaction ID: SE24.498 **BAYVILLE** NJ 08721 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 10 PRINTING/POSTAGE Type Name of Federal Candidate: 19 X Support X House Office Sought: District: MOLINARO, MARCUS, , , NY Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 669321.34 2024 Per Election for Office Sought Other (specify) ▶ 33827.93 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 04 10 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 107 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C Good Sold
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				10 04 2024
Mailing Address PO BOX 408			Amou	unt
City	State	Zip Code	$-\Gamma$	18023.87
BAYVILLE	NJ	08721		saction ID : SE24.499 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type	_ L	10 06 2024
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 19
RILEY, JOSH, , ,		X Oppose	Presid	dent Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		669321.34	Disburseme 2024	nt For:
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address PO BOX 408				10 14 2024
FO BOX 400			Amou	unt
City	State	Zip Code	— F.	14315.20
BAYVILLE	NJ	08721	I	saction ID : SE24.524 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
PRINTING/POSTAGE		Type		10 09 2024
Name of Federal Candidate:		X Support	Office Soug	ht: X House District: 08
EVANS, GABE, , ,		Oppose	Presid	dent Senate State: CO
Calendar Year-To-Date		407218.83	Disburseme 2024	nt For: Primary X General
Per Election for Office Sought	7 7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	32339.07
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	7 7 7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5.	M = M /	06 2024
Signature		_ Date	10	2027

TEMIZED INDEPENDENT EXPENDITURES				PAGE 108 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0 ,
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408			Amo	ount
City	State	Zip Code		14315.19
BAYVILLE	NJ	08721		nsaction ID : SE24.525 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M - M / D - D / Y - Y - Y - Y
PRINTING/POSTAGE		Туре	_ _	10 09 2024
Name of Federal Candidate:		Support	Office Sou	ght: X House District:08
CARAVEO, YADIRA, , ,		Oppose	Pres	ident Senate State: CO
Calendar Year-To-Date		407249.92	Disbursem	ent For: Primary X General
Per Election for Office Sought	7 7	407218.83	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				10 07 2024
1 0 Box 400			Amo	ount
City	State	Zip Code		15808.50
BAYVILLE	NJ	08721		insaction ID : SE24.526 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FRINTING/FOSTAGE		Type		
Name of Federal Candidate:		X Support	Office Sou	ght: X House District:02
HERRELL, YVETTE, , ,		Oppose	Pres	ident Senate State: NM
Calendar Year-To-Date		395244.03	Disbursem	ent For: Primary X General
Per Election for Office Sought	7 - 1 - 7	000211100	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • [_]	30123.69
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· • L	
(a) TOTAL landers and set Formandifferen				
(c) TOTAL Independent Expenditures			• _	7 7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_	M M	/ D D / Y Y Y Y
Signature		_ Date	9 10	09 2024

3011E30EE	01111 071)							
TEMIZED INDEPENDENT E	EXPENDITURES				_	PAGE 109	<u> </u>	224
NAME OF COMMITTEE (In Full)					<u> </u>	FOR LINE 24		
America PAC					La L	ENTIFICATIO	N NUMB	ER ▼
America i AC					C	C00879510		
Check if 24-hour report	48-hour report	New repo	ort Amends repo	ort filed or	n M M /	D D /	Y Y Y Y	Y
Full Name of Payee			☐ Memo	Item [Date of Public	Distribution/D	issemina	tion
GOLDFINCH PARTNERS LLC					10	07 /	2024	4
Mailing Address PO BOX 408				,	Amount			
City		State	Zip Code				15808.5	50
			08721		Transaction IE) · SE24 527	13000.	30
BAYVILLE		NJ	00721		Date of Disbur		oligation	
Purpose of Expenditure PRINTING/POSTAGE			Category/ Type		10	09	2024	
Name of Federal Candidate:			Support	Office S	Sought: X	House D)istrict:	02
VASQUEZ, GABRIEL, , ,			Oppose		President	_		NM
Calendar Year-To-Date				Disburs	sement For:	Primary	X Ge	eneral
Per Election for Office So	ught	7 7	395244.03	2024	Other (spe	ecify) ►		
Full Name of Payee			Memo	Item [Date of Public	Distribution/D	issemina	tion
GOLDFINCH PARTNERS LLC					M M /	08 /	^Y ^Y 202 ⁴	YYY
Mailing Address PO BOX 408					10	00	ZUZ	
1 0 20% 100				<i>I</i>	Amount			
City		State	Zip Code				18023.8	38
BAYVILLE		NJ	08721	I .	Transaction II	D : SE24.528	ligation	
Purpose of Expenditure			Category/		Date of Disburs	sement or Ob	_	Y
PRINTING/POSTAGE			Type		10	09	2024	
Name of Federal Candidate:			Support	Office S	Sought: X	House D)istrict:	19
MOLINARO, MARCUS, , ,			Oppose	P	President	Senate	State:	NY
Calendar Year-To-Date			669321.34	1	sement For:	Primary	X Ge	eneral
Per Election for Office So	ught	7	00021101	2024	Other (spe	ecify) ►		
	=			г			22222	
(a) SUBTOTAL of Itemized Indep	endent Expenditures			. •			33832.38	3
(b) SUBTOTAL of Unitemized In	dependent Expenditur	res			1 1 1			
(c) TOTAL Independent Expendi	tures			[7
(-,					7	7		
Under penalty of perjury I certification with, or at the request or suggestantly committee) any political party committee.	estion of, any candida	ate or authorized						
GOBER, CHRIS, , ,			Date	M = N	/ 09	/ Y Y Y Y Y Y 2024	Y	

TEMIZED INDEPENDENT EXPENDITORES				PAGE 110 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item [Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				10 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408			,	Amount
City	State	Zip Code		18023.87
BAYVILLE	NJ	08721	I	Fransaction ID : SE24.529 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Туре		10 09 2024
Name of Federal Candidate:		Support	Office S	Sought: X House District: 19
RILEY, JOSH, , ,		Oppose	F	resident Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	, , ,	669321.34	Disburs 2024	ement For: ☐ Primary ☒ General Other (specify) ▶
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				10 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				Amount
				Anount
City	State	Zip Code		18342.77
BAYVILLE	NJ	08721		Transaction ID : SE24.530 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Туре		10 00 2024
Name of Federal Candidate:		X Support	Office S	Sought: House District:17
LAWLER, MIKE, , ,		Oppose	F	resident Senate State: NY
Calendar Year-To-Date		1411214.06	Disburs	ement For: Primary X General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. [36366.64
(b) SUBTOTAL of Unitemized Independent Expenditure	95		. [
(b) GOBTOTAL OF OTHER MIZE OF MACHINETIC EXPERIMENT	00		•	
(c) TOTAL Independent Expenditures			• • [
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidat party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 :	e 10	09 2024
Signature		_ Date	= 10	2027

TEMIZED INDEPENDENT EXPENDITURES				PAGE 111 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				G states
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				Amount
City	State	Zip Code		18342.77
BAYVILLE	NJ	08721		Transaction ID : SE24.531 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y
PRINTING/POSTAGE		Type		10 09 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 17
JONES, MONDAIRE, , ,		Oppose		President Senate State: NY
Calendar Year-To-Date			1	sement For: Primary X General
Per Election for Office Sought	7 1 7	1411214.06	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				10 08 2024
PO BOX 400				Amount
City	State	Zip Code		11529.92
BAYVILLE	NJ	08721		Transaction ID : SE24.532 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		10 09 2024
Name of Federal Candidate:		X Support	Office	Sought: House District:02
BACON, DON, , ,		Oppose		President Senate State: NE
Calendar Year-To-Date		328882.56		sement For: Primary X General
Per Election for Office Sought	7 7 -	320002.30	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	29872.69
				, , , , , , , , , , , , , , , , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(a) TOTAL lades and ant Europe ditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
Signature		_ Date	e 10	09 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 112 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 000079310
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address PO BOX 408				
			Amou	nt
City	State	Zip Code		11529.91
BAYVILLE	NJ	08721		action ID : SE24.533 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 09 2024
Name of Federal Candidate:		Support	Office Sough	t: X House District: 02
VARGAS, TONY, , ,		Oppose	Preside	NE
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	328882.56	Disbursemen	
Full Name of Payee		Memo		of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC			N	10M / D D / Y Y Y Y
Mailing Address PO BOX 408				10 11 2024
FO BOX 400			Amou	nt
City	State	Zip Code	ΗГ:	22059.59
BAYVILLE	NJ	08721	Trans	saction ID : SE24.596 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	N	10 11 7 2024
Name of Federal Candidate:		X Support	Office Sough	it: X House District:00
BEGICH, NICK, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7	402336.21	Disbursemen	t For: ☐ Primary ☐ General
(a) SUBTOTAL of Itemized Independent Expenditures			•	33589.50
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M /	09 / 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 113 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M M / D D / Y Y Y Y Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 408				Amount
City	State	Zip Code	$\overline{}$	22059.59
BAYVILLE	NJ	08721		Transaction ID : SE24.597 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 / 11 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
PELTOLA, MARY, , ,		X Oppose		President Senate State: AK
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	402336.21	Disbur 2024	sement For:
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address PO BOX 408				Amount
City	State	Zip Code	$\overline{}$	15793.50
BAYVILLE	NJ	08721		Transaction ID : SE24.598 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 11 / 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 02
HERRELL, YVETTE, , ,		Oppose		President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	7	395244.03	Disbur 2024	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	37853.09
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GORER CHRIS			M	M / D D / Y Y Y Y
GOBER, CHRIS, , ,		_ Date	10	11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 114 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C coorser
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408			Am	ount
City	State	Zip Code	ΗГ	15793.50
BAYVILLE	NJ	08721		ansaction ID : SE24.599 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type	_	10 11 2024
Name of Federal Candidate:		Support	Office Sor	ught: X House District: 02
VASQUEZ, GABRIEL , , ,		Oppose	Pre	sident Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	, , ,	395244.03	Disbursen 2024	nent For: Primary
Full Name of Payee		Memo	Item Date	te of Public Distribution/Dissemination
GOLDFINCH PARTNERS LLC				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 408				10 10 2024
T G BGX 100			Am	ount
City	State	Zip Code		22059.59
BAYVILLE	NJ	08721		ansaction ID : SE24.642 te of Disbursement or Obligation
Purpose of Expenditure		Category/		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		10 13 2024
Name of Federal Candidate:		X Support	Office Sor	ught: House District:00
BEGICH, NICK, , ,		Oppose	Pre	sident Senate State: AK
Calendar Year-To-Date		402336.21	Disbursen	nent For: Primary X General
Per Election for Office Sought	7 7	102000.21	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				37853.09
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		- .	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 10	11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 115 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee GOLDFINCH PARTNERS LLC		☐ Memo	Item D	ate of Public Distribution/Dissemination
Mailing Address PO BOX 408				10 15 2024
				mount
City	State	Zip Code		22059.59
BAYVILLE	NJ	08721		ransaction ID : SE24.643 ate of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: X House District:00
PELTOLA, MARY, , ,		Oppose	l	esident Senate State: AK
Calendar Year-To-Date			Disburse	ement For: Primary X General
Per Election for Office Sought	7 7	402336.21	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
IMGE LLC				09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				mount
Oth	04-4-	Zin Onda		141723.24
City WASHINGTON	State	Zip Code 20005		Fransaction ID : SE24.403 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		10 01 2024
Name of Federal Candidate:		Support	Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pr	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disburse 2024	ement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				163782.83
				, , , , , , , , , , , , , , , , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· • L	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y Y
Signature		_ Date	10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 116 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee IMGE LLC		☐ Memo	Item D	Pate of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			A	mount
City	State	Zip Code	-	141723.23
WASHINGTON	DC	20005		ransaction ID : SE24.404 late of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 01 / 2024
Name of Federal Candidate:		Support	Office S	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose		resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 10	5457794.82	Disburse 2024	ement For: Primary X General Other (specify) ▶
Full Name of Payee IMGE LLC		☐ Memo	Item D	Pate of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550				10 01 2024 mount
0.11		T 0 1		425746.02
City WASHINGTON	State	Zip Code 20005		125746.83 Fransaction ID : SE24.405 Date of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Туре		10 01 2024
Name of Federal Candidate:		X Support	Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X PI	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburse 2024	ement For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Uniterprized Independent Expenditures				267470.06
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• [
(c) TOTAL Independent Expenditures			• [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GONER GURYS			M = M	/ D D / Y Y Y Y
GOBER, CHRIS, , ,		_ Date	10	01 2024

TEMIZED INDEPENDENT EXPENDITURE	S			PAGE 117 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	·	☐ Memo	Item D	ate of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y
Mailing Address 1401 H STREET NW STE 550			A	10 01 2024 mount
City	State	Zip Code	r	137500.00
WASHINGTON	DC	20005		ransaction ID : SE24,406
				ate of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 / 01 / 2024
Name of Federal Candidate:		Support	Office S	ought: House District:00
TRUMP, DONALD, , ,		Oppose	X Pr	esident Senate State:
Calendar Year-To-Date				ement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		Memo	Item D	ate of Public Distribution/Dissemination
IMGE LLC		□ Memo	item 5	M M / D D / Y Y Y Y
Mailing Address				10 06 2024
Mailing Address 1401 H STREET NW STE 550			A	mount
City	State	Zip Code	— г	120544.29
WASHINGTON				ransaction ID : SE24.500
	DC	20005	I	ate of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		M 10
Name of Federal Candidate:		X Support	Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose		esident Senate State:
Calendar Year-To-Date			Disburse	ement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
	· · · · · · · · · · · · · · · · · · ·			Other (specify) P
(a) SUBTOTAL of Itemized Independent Expenditure	0.0		. г	258044.29
(a) SOBTOTAL OF REMIZED INDEPENDENT Experiorum	5 5		•	230044.23
(b) SUBTOTAL of Unitemized Independent Expendi	tures		. [
(b) COSTOTAL OF CHIRCHIES WINDOWN EXPONDE				
(c) TOTAL Independent Expenditures			Г	
(i)				
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candi party committee) any political party committee or i	date or authorized			
CODED CUBIS			M = M	/ D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	10	01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 118 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
· · ·				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			l	10 06 2024
			Amo	unt
City	State	Zip Code		59045.16
WASHINGTON	DC	20005		saction ID : SE24.501 of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:00
TRUMP, DONALD, , ,		Oppose	X Presid	
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
IMGE LLC			Г	M M / D D / Y Y Y
Mailing Address			L	10 06 2024
1401 H STREET NW STE 550			Amou	unt
City	State	Zip Code		54842.34
WASHINGTON	DC	20005	Trar	nsaction ID : SE24.503 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
TEXTING		Type	_	10 07 2524
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date		5 45770 4 00	Disburseme	nt For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				113887.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
				, , , , , , , , , , , , , , , , , , , ,
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
CODED CHDIS			M = M /	D D / Y T Y T Y
GOBER, CHRIS, , , Signature		_ Date	e 10	07 2024

 $GOBER,\ CHRIS,\ ,\ ,$

Signature

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES				PAGE 119 OF 224
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			A	10 06 2024 mount
City	Ctoto	Zin Codo	r	54842.33
City WASHINGTON	State DC	Zip Code 20005	I	ransaction ID : SE24.504 ate of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose		esident Senate State:
Calendar Year-To-Date Per Election for Office Sought	1(05457794.82	Disburse	ment For: Primary
Full Name of Payee	,	☐ Memo	Itam D	ate of Public Distribution/Dissemination
IMGE LLC		іметіо	item D	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			A	mount
City	State	Zip Code		54846.04
WASHINGTON	DC	20005		ransaction ID : SE24.509 ate of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		10 07 2024
Name of Federal Candidate:		Support	Office So	ought: House District:00
TRUMP, DONALD, , ,		Oppose		esident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disburse 2024	ment For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures				109688.37
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			

2024

07

10

Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 120 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
IMGE LLC			M	10 07 7 2024
Mailing Address 1401 H STREET NW STE 550			Amou	nt
City	State	Zip Code	-	54846.03
WASHINGTON	DC	20005		action ID : SE24.510 of Disbursement or Obligation
Purpose of Expenditure		Category/		- M / D D / Y Y Y Y
TEXTING		Type	_ _	10 07 2024
Name of Federal Candidate:		Support	Office Sough	t: District: 00
HARRIS, KAMALA, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursemen	t For: Primary X General
Per Election for Office Sought	7			ther (specify) ▶
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
IMGE LLC			M	10 09 7 2024
Mailing Address 1401 H STREET NW STE 550			Amour	nt
Oth	0	7:- O-d-		548460.37
City WASHINGTON	State	Zip Code 20005		saction ID : SE24.549 of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M / D D / Y Y Y
TEXTING		Туре	<u> </u>	10 09 2024
Name of Federal Candidate:		Support	Office Sough	t: District: 00
HARRIS, KAMALA, , ,		Oppose	X Preside	ent Senate State:
Calendar Year-To-Date	10	5457794.82	Disbursemen	t For: Primary X General
Per Election for Office Sought	7 7		o	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				603306.40
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	.,,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		- .	M M /	07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10	07 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 121 OF 224
NAME OF COMMITTEE (In Full)			-	FOR LINE 24 OF FORM 3X
America PAC			l l	C C00879510 C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y D Y Y Y Y
Full Name of Payee IMGE LLC Mailing Address 1401 H STREET NW STE 550		☐ Memo		Public Distribution/Dissemination O 08 / Y 2024
		7: 0 !		E7545.04
City WASHINGTON	State DC	Zip Code 20005		57545.64 Stion ID : SE24.550 Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type	M 10	M / D D / Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District:00
TRUMP, DONALD, , ,		Oppose	X President	
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disbursement F	
Full Name of Payee IMGE LLC Mailing Address 1401 H STREET NW STE 550		☐ Memo	Item Date of	
1401 H STREET NW STE 550			Amount	
City WASHINGTON	State	Zip Code 20005		57545.64 ction ID : SE24.551 Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		M / D D / Y Y Y
Name of Federal Candidate: HARRIS, KAMALA, , ,		Support Oppose	Office Sought:	House District: 00 t Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursement F	For: Primary X General er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			·	115091.28
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	7
(c) TOTAL Independent Expenditures			•	4
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	4.6	09 / 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 122 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
IMGE LLC				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			Δη	nount
City	State	Zip Code	L	109692.07
WASHINGTON	DC	20005		ansaction ID : SE24.552 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
TEXTING		Type		10 09 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date			Disburser	ment For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				10 09 2024
1401 H STREET NW STE 550			An	nount
City	State	Zip Code		978292.63
WASHINGTON	DC	20005	I	ansaction ID : SE24.534
Purpose of Expenditure		Category/	Da	te of Disbursement or Obligation
TEXTING		Type		10 / 09 / 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date	10	5457794.82	Disburser	ment For: Primary X General
Per Election for Office Sought	1	3437734.02	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	1087984.70
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· -	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CORED CHDIS			M = M	/ DPD / YPYPY
GOBER, CHRIS, , , Signature		_ Date	9 10	09 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 123 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
IMGE LLC				10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		33929.56
WASHINGTON	DC	20005		Transaction ID : SE24.583
Purpose of Expenditure		Catamani	_	Date of Disbursement or Obligation
TEXTING		Category/ Type		10 10 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date				rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y Y
Mailing Address				10 09 2024
1401 H STREET NW STE 550				Amount
City	State	Zip Code		29997.55
WASHINGTON	DC	20005		Transaction ID : SE24.584 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
TEXTING		Type		10 10 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	E4E7704 92		rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
<u> </u>			•	
(a) SUBTOTAL of Itemized Independent Expenditures				63927.11
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CODER CHRIS			M	M / D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	10 2024

TEMIZED INDEDENDENT EVDENDITUDES				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 124 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	M	
Mailing Address 1401 H STREET NW STE 550			Amount	
City	State	Zip Code		29997.55
WASHINGTON	DC	20005	I	ction ID : SE24.585 Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type	M 1	0 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District:00
HARRIS, KAMALA, , ,		Oppose	X Presiden	nt Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disbursement 2024	
Full Name of Payee		Memo		Public Distribution/Dissemination
IMGE LLC		Memo		M / D D / Y Y Y Y
Mailing Address				0 09 2024
1401 H STREET NW STE 550			Amount	
City	State	Zip Code		115990.04
WASHINGTON	DC	20005		ction ID : SE24.586 Disbursement or Obligation
Purpose of Expenditure		Category/	М	M / D D / Y Y Y Y
TEXTING		Type		0 10 2024
Name of Federal Candidate:		Support	Office Sought:	House District: 00
TRUMP, DONALD, , ,		Oppose	X Presiden	
Onlandor Vers To Date			Disbursement	
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	2024	ner (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	í		·	145987.59
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	7
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		· ·
COPER CHRIS			M = M /	D D / Y Y Y Y Y
GOBER, CHRIS, , ,		_ Date	9 10	10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 125 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Am	ount
City	State	Zip Code	-	115990.03
WASHINGTON	DC	20005		insaction ID : SE24.587 e of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		10 10 / 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursem 2024	nent For: Primary
Full Name of Payee IMGE LLC		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Am	10 15 2024 ount
0.11	To: .			60450.93
City WASHINGTON	State	Zip Code 20005	l l	60159.82 ansaction ID : SE24.602 e of Disbursement or Obligation
Purpose of Expenditure	•	Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Туре		10 11 2024
Name of Federal Candidate:		X Support	Office Sou	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursem 2024	nent For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure				176149.85
(a) colling a continuous masponasia Enponasia				, , , , ,
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CORER CURY			M = M	/ D D / Y Y Y Y Y
GOBER, CHRIS, , ,		_ Date	10	10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 126 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America i Ac				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
			[M 10
Mailing Address 1401 H STREET NW STE 550			Amou	int
City	State	Zip Code	$ \Gamma$	60159.82
WASHINGTON	DC	20005	I	saction ID : SE24.603 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type	_ L	10 11 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presid	lent Senate State:
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		Memo	T _	of Public Distribution/Dissemination
IMGE LLC				10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				10 10 2024
			Amou	ınt
City	State	Zip Code		23874.46
WASHINGTON	DC	20005		saction ID : SE24.604 of Disbursement or Obligation
Purpose of Expenditure		Category/ 10 11 / Y		
TEXTING		Type		10 / 11 / 2024
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	lent Senate State:
Calendar Year-To-Date	10	E 4 E 7 7 0 4 9 9	Disburseme	nt For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				84034.28
(b) SUBTOTAL of Unitemized Independent Expenditur	es		• •	
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GORER CHRIS			M = M /	D D / Y Y Y Y Y
GOBER, CHRIS, , ,		Date	10	11 2024

TEMPLES INDEL ENDERN EXI ENDITORED				PAGE 127 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
				10 10 Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		23874.46
WASHINGTON				Transaction ID : SE24.605 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
TEXTING		Type		10 11 2024
Name of Federal Candidate:		Support	Office	e Sought: House District: 00
HARRIS, KAMALA, , ,		X Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbu 2024	rrsement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
IMGE LLC				10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
				Amount
City	State	Zip Code		111111.00
WASHINGTON	DC	20005		Transaction ID : SE24.644 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 15 / Y Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	l	
		Орросо		
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	2024	ursement For: Primary X General
Tot Election to Since Godgitt	7 7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			. •	134985.46
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures				
,, ,				7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		D-1-	M 1	0 11 2024
Signature		_ Date	e 1	2024

TEMIZED INDEPENDENT EXPENDITURES			
TEMIZED INDEPENDENT EXPENDITURES			PAGE 128 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
America PAC			C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee		☐ Memo	M = M / D = D / Y = Y = Y
Mailing Address 1401 H STREET NW STE 550			10 14 2024 Amount
City	State	Zip Code	111111.00
WASHINGTON	DC	20005	Transaction ID : SE24.645 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	
IMGE LLC		_	10 15 2024
Mailing Address 1401 H STREET NW STE 550			Amount
	T	T	
City WASHINGTON	State	Zip Code 20005	Transaction ID : SE24.646 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	
TEXTING		Type	10 15 / Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		128075.78
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	· · · · · · · · · · · · · · · · · · ·
CODED CHDIS			M - M / D - D / Y - Y - Y
GOBER, CHRIS, , ,		_ Date	, 10 15 2024

TIEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
IMGE LLC			r	M M / D D / Y Y Y
Mailing Address			L	10 14 2024
1401 H STREET NW STE 550			Amou	int
City	State	Zip Code	-	150661.00
WASHINGTON	DC	20005	Trans	saction ID : SE24.647
Purpose of Expenditure				of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		10 15 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District:00
TRUMP, DONALD, , ,		Oppose	X Presid	lent Senate State:
Calendar Year-To-Date			Disburseme	nt For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		Memo	T _	of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y Y Y
Mailing Address			— L	10 14 2024
1401 H STREET NW STE 550			Amou	ınt
City	State	Zip Code	-	150661.00
WASHINGTON	DC	20005	Tran	saction ID : SE24.648
Purpose of Expenditure			Date	of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type	IJ L	10 15 7 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presid	lent Senate State:
Calendar Year-To-Date			Disburseme	nt For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	S			301322.00
,,				
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•		•
CODED CHDIS			M = M /	D D / Y Y Y Y Y
GOBER, CHRIS, , ,		_ Date	10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 130 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
IMGE LLC				10 / 14 / Y 2024
Mailing Address 1401 H STREET NW STE 550			Am	ount
City	State	Zip Code	— Г	65444.46
WASHINGTON	DC	20005		insaction ID : SE24.694 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		10 15 2024
Name of Federal Candidate:		X Support	Office Sou	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 10	5457794.82	Disbursem 2024	nent For:
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
IMGE LLC				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				
			Am	ount
City	State	Zip Code		22895.73
WASHINGTON	DC	20005		ansaction ID : SE24.671 e of Disbursement or Obligation
Purpose of Expenditure		Category/		10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type		10 13 2024
Name of Federal Candidate:		X Support	Office Sou	ught: House District: 22
VALADAO, DAVID, , ,		Oppose	Pres	sident Senate State: CA
Calendar Year-To-Date		809994.44	Disbursem	nent For: Primary X General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				88340.19
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		Date	M M M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	; 10	10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 131 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FF	EC IDENTIFICATION NUMBER ▼
America PAC				C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	/ D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of F	
Mailing Address 1401 H STREET NW STE 550			Amount	
City	State	Zip Code		22895.73
WASHINGTON	DC	20005		tion ID : SE24.672 Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	M 10	
Name of Federal Candidate:		Support	Office Sought:	House District: 22
SALAS, RUDY, , ,		Oppose	President	
Calendar Year-To-Date Per Election for Office Sought		809994.44	Disbursement F 2024 Othe	or: ☐ Primary ☐ General
Full Name of Payee		Memo	Item Date of F	Public Distribution/Dissemination
IMGE LLC			M 10	
Mailing Address 1401 H STREET NW STE 550			Amount	
City	State	Zip Code		38592.85
WASHINGTON	DC	20005		tion ID : SE24.673 Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	M 10	
Name of Federal Candidate: CALVERT, KEN, , ,		Support Oppose	Office Sought:	House District: 41
,,,,,,		Орроѕе	President	Senate State.
Calendar Year-To-Date Per Election for Office Sought	7	1277455.72	Disbursement F 2024 Othe	or:
(a) SUBTOTAL of Itemized Independent Expenditures			·	61488.58
(b) SUBTOTAL of Unitemized Independent Expenditure	res		>	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	and the second second	15 / 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 132 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	1
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
IMGE LLC				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			,	Amount
City	State	Zip Code		38592.84
WASHINGTON	DC	20005		Transaction ID : SE24.674
Purpose of Expenditure		Catanani		Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		10 15 2024
Name of Federal Candidate:		Support	Office S	Sought: X House District: 41
ROLLINS, WILL, , ,		Oppose	P	resident Senate State: CA
Calendar Year-To-Date			Disburs	ement For: Primary X General
Per Election for Office Sought	7-1-1-7-	1277455.72	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				10 15 2024
1401 H STREET NW STE 550			A	Amount
City	State	Zip Code		33857.90
WASHINGTON	DC	20005		Transaction ID : SE24.675 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Туре		10 15 2024
Name of Federal Candidate:		X Support	Office S	Sought: K House District: 45
STEEL, MICHELLE, , ,		Oppose	P	resident Senate State: CA
Calendar Year-To-Date		deducted.	Disburs	ement For: Primary X General
Per Election for Office Sought	7 7	1074401.97	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			[72450.74
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CORED CHRIS			M = N	/ D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 133 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		33857.90
WASHINGTON	DC	20005		Transaction ID : SE24.676 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 / D D / Y Y Y Y Y Y Y 15 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 45
TRAN, DEREK, , ,		X Oppose	l	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7	1074401.97	Disbu 2024	rsement For: Primary
Full Name of Payee IMGE LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550				10 15 2024 Amount
City	State	Zip Code		23796.45
WASHINGTON	DC	20005		Transaction ID : SE24.677 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: THERIAULT, AUSTIN, , ,		Support Oppose	l	Sought: House District: 02 President Senate State: ME
Calendar Year-To-Date			-	rsement For: Primary X General
Per Election for Office Sought	7 7	772683.43	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		. •	57654.35
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	e 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 134 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C Good Solid
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	1 M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item C	Date of Public Distribution/Dissemination
IMGE LLC				10 15 / 2024
Mailing Address 1401 H STREET NW STE 550			A	mount
City	State	Zip Code		23796.45
WASHINGTON	DC	20005		Fransaction ID : SE24.678 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Туре		10 15 2024
Name of Federal Candidate:		Support	Office S	Sought: X House District: 02
GOLDEN, JARED, , ,		Oppose	P	resident Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	, , ,	772683.43	Disburs 2024	ement For:
Full Name of Payee		Memo	Item [Date of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				
			l A	mount
City	State	Zip Code		19367.17
WASHINGTON	DC	20005		Transaction ID : SE24.679 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type	_	
Name of Federal Candidate:		X Support	Office S	Sought:
KENT, JOE, , ,		Oppose	P	resident Senate State: WA
Calendar Year-To-Date		635211.89		ement For: Primary X General
Per Election for Office Sought	T T	033211.09	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	43163.62
			- 7	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 135 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				10 15 2024
1401 H STREET NW STE 550				Amount
City	State	Zip Code		19367.16
WASHINGTON	DC	20005		Transaction ID : SE24.680 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 15 / 2024
Name of Federal Candidate:		Cupport	Office	Sought: X House District: 03
GLUESENKAMP PEREZ, MARIE, , ,		Support Oppose		Sought: Mouse District: US President Senate State: WA
Calendar Year-To-Date		Z		sement For: Primary X General
Per Election for Office Sought	, , ,	635211.89	2024	Other (specify)
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
IMGE LLC				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		30206.69
WASHINGTON	DC	20005		Transaction ID : SE24.681 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Type		10 15 2024
Name of Federal Candidate:		X Support	Office	Sought: House District:09
MERRIN, DERRICK, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		832697.30	Disbur 2024	sement For: Primary X General
Per Liection for Office Sought	7 7		2021	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶	49573.85
(1) OUDTOTAL (1) 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
(b) SUBTOTAL of Unitemized Independent Expenditure	'es			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_		M / D D / Y Y Y Y Y
Signature		_ Date	e 10	15 2024

TEMIZED INDEPENDENT EXPENDITORES				PAGE 136 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item D	Pate of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y Y
Mailing Address 1404 H STREET NW STE 550				10 15 2024
1401 H STREET NW STE 550			A	mount
City	State	Zip Code		30206.68
WASHINGTON	DC	20005		ransaction ID : SE24.682 late of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		10 15 2024
Name of Federal Candidate:		Support	Office S	ought: X House District:09
KAPTUR, MARCY, , ,		Oppose	Pi	resident Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	832697.30	Disburse 2024	ement For: ☐ Primary ☒ General ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	Pate of Public Distribution/Dissemination
IMGE LLC				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				
			A	mount
City	State	Zip Code		32308.36
WASHINGTON	DC	20005		Fransaction ID: SE24.683 Pate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		10 15 2024
Name of Federal Candidate:		X Support	Office S	lought: House District: 13
COUGHLIN, KEVIN, , ,		Oppose	Pi	resident Senate State: OH
Calendar Year-To-Date		1022567 72		ement For: Primary X General
Per Election for Office Sought	T - T -	1033567.73	2024	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				62515.04
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· • _	
(a) TOTAL lands are all out Forman differen				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		Date	e 10	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10	10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 137 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
IMGE LLC				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				
			Am	ount
City	State	Zip Code		32308.35
WASHINGTON	DC	20005		insaction ID : SE24.684 e of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ught: X House District: 13
SYKES, EMILIA, , ,		Oppose	l —	sident Senate State: OH
Calendar Year-To-Date			Disbursem	
Per Election for Office Sought	7	1033567.73	2024	Other (specify) ▶
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination
IMGE LLC		Weine		M M / D D / Y Y Y
Mailing Address				10 15 2024
1401 H STREET NW STE 550			Am	ount
City	State	Zip Code	— F	28276.42
WASHINGTON	DC	20005		ansaction ID : SE24.685 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Туре		10 15 2024
Name of Federal Candidate:		X Support	Office Sou	ught: X House District:03
NUNN, ZACH, , ,		Oppose	Pres	sident Senate State: IA
Calendar Year-To-Date			Disbursem	nent For: Primary X General
Per Election for Office Sought	7 7	402525.90	2024	Other (specify) ▶
				(4)
(a) SUBTOTAL of Itemized Independent Expenditures				60584.77
, ,				
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures				
				, , , , , , , , , , , , , , , , , , , ,
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
			M	/ D D / Y Y Y Y Y
GOBER, CHRIS, , ,		Date	10	15 2024

TEMIZED INDEPENDENT EXPENDITURES	;			PAGE 138 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼ C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee IMGE LLC Mailing Address 1401 H STREET NW STE 550		☐ Memo	Item Date	of Public Distribution/Dissemination
			Amo	unt
City WASHINGTON	State	Zip Code 20005	Trar	28276.41 asaction ID : SE24.686
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		e of Disbursement or Obligation
Name of Federal Candidate: BACCAM, LANON, , ,		Support Oppose	Office Soug	ΙΛ
Calendar Year-To-Date Per Election for Office Sought	7	402525.90	Disburseme	ent For:
Full Name of Payee IMGE LLC		☐ Memo	ltem Date	e of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Amo	unt
City WASHINGTON	State	Zip Code 20005	l l	42618.99 nsaction ID : SE24.687 of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		M 10 / 15 / Y 2024
Name of Federal Candidate: KEAN, TOM, , ,		Support Oppose	Office Soug	NI NI
Calendar Year-To-Date Per Election for Office Sought	7	762074.77	Disburseme 2024	ent For:
(a) SUBTOTAL of Itemized Independent Expenditure: (b) SUBTOTAL of Unitemized Independent Expenditure:			· 🗀	70895.40
(c) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	late or authorized			
GOBER, CHRIS, , ,		Date	M = M /	15 2024
Signaturo		_		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 139 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 1401 H STREET NW STE 550			Am	10 15 2024 ount
City	State	Zip Code	— F	42618.98
WASHINGTON	DC	20005		insaction ID : SE24.688 e of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/ Type		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ught: House District:07
ALTMAN, SUE, , ,		Oppose	Pres	sident Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought	7	762074.77	Disbursem 2024	nent For:
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550			Am	ount
City	State	Zip Code		63105.51
WASHINGTON	DC	20005		ansaction ID : SE24.689 e of Disbursement or Obligation
Purpose of Expenditure TEXTING		Category/ Type		10 / D D D D D D D D D D D D D D D D D D
Name of Federal Candidate:		X Support	Office Sou	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10)5457794.82	Disbursem 2024	nent For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;			105724.49
.,				
(b) SUBTOTAL of Unitemized Independent Expenditu	res		 _	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
GOBER, CHRIS, , ,		_ Date	e 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 140 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				O
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
IMGE LLC				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				
			AI	nount
City	State	Zip Code		63105.50
WASHINGTON	DC	20005		ransaction ID : SE24.690 ate of Disbursement or Obligation
Purpose of Expenditure		Category/	\neg	M = M / D = D / Y = Y = Y
TEXTING		Type		10 15 2024
Name of Federal Candidate:		Support	Office So	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date	40	VE 457704 00		ment For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
IMGE LLC				10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				10 10 2024
110111011112111111012000			Ar	nount
City	State	Zip Code		3014.15
WASHINGTON	DC	20005		ransaction ID : SE24.699 ate of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y
TEXTING		Туре		10 15 2024
Name of Federal Candidate:		X Support	Office So	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date	10	5457794.82		ment For: Primary X General
Per Election for Office Sought	1	0 10770 11.02	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶	66119.65
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			. г	
(b) TO TAL masperiating Experiations			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y
Signature		_ Date	e 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 141 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
IMGE LLC				10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		3014.15
WASHINGTON	DC	20005		Transaction ID : SE24.700
Purpose of Expenditure		Catamani	_	Date of Disbursement or Obligation
TEXTING		Category/ Type		10 15 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date			-	rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) >
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
IMGE LLC				M M / D D / Y Y Y Y
Mailing Address 1404 H STREET NW STE 550				10 19 2024
1401 H STREET NW STE 550				Amount
City	State	Zip Code		53909.95
WASHINGTON	DC	20005		Transaction ID : SE24.716 Date of Disbursement or Obligation
Purpose of Expenditure	1	Category/	$\overline{}$	M M / D D / Y Y Y Y
TEXTING		Type	_	10 15 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	40	VE 45770 4 00	Disbur	sement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
<u> </u>				
(a) SUBTOTAL of Itemized Independent Expenditures			. •	56924.10
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CODED CHDIS			M =	M / D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 142 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 6000/3310
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination
IMGE LLC				M 10
Mailing Address 1401 H STREET NW STE 550			Am	ount
City	State	Zip Code		53909.95
WASHINGTON	DC	20005		insaction ID : SE24.717 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
TEXTING		Type		10 15 2024
Name of Federal Candidate:		Support	Office Sou	ught: House District:00
HARRIS, KAMALA, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursem 2024	nent For:
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination
IMGE LLC				10 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				
			Am	ount
City	State	Zip Code		11277.78
WASHINGTON	DC	20005		ansaction ID : SE24.723 e of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA		Category/		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
DIGITAL MEDIA		Type		لىنىا لتا لتا
Name of Federal Candidate:		Support	Office Sou	ught: House District:00
HARRIS, KAMALA, , ,		Oppose	X Pres	sident Senate State:
Calendar Year-To-Date	10	5457794.82	Disbursem	nent For: Primary X General
Per Election for Office Sought	10	3437794.62	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	65187.73
				, , , , , , , , , , , , , , , , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditur	es		• •	
(c) TOTAL Independent Expenditures				
			, L	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 .	M M M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 10	10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 143 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0 000073310
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
IMGE LLC				10 15 / 2024
Mailing Address 1401 H STREET NW STE 550			An	nount
City	State	Zip Code	— I	6666.67
WASHINGTON	DC	20005		ansaction ID : SE24.727 te of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
DIGITAL MEDIA		Type		10 16 2024
Name of Federal Candidate:		X Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date		iniaia ia	Disburser	nent For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
IMGE LLC				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				10 13 2024
14011131KEE1 NW 31E 330			An	nount
City	State	Zip Code		6666.66
WASHINGTON	DC	20005		ransaction ID : SE24.728 te of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Type		10 16 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		X Oppose	X Pre	sident Senate State:
Calendar Year-To-Date	10	5457794.82	Disburser	ment For: Primary X General
Per Election for Office Sought	7	0.10.10.110.11	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • L	13333.33
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		· • L	
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	16 2024

TEMPLES INDEX ENDERY EXILENCES				PAGE 144 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
				10
Mailing Address 1401 H STREET NW STE 550				Amount
City	State	Zip Code		23507.44
WASHINGTON	DC	20005		Transaction ID : SE24.729 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	$\overline{}$	M M / D D / Y Y Y Y
TEXTING		Type		10 16 2024
Name of Federal Candidate:		X Support	Office	e Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbu 2024	rsement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
IMGE LLC				10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
	T	I =		00507.40
City	State	Zip Code		23507.43
WASHINGTON	DC	20005		Transaction ID : SE24.730 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
TEXTING		Type		10 16 2024
Name of Federal Candidate:		Support	Office	e Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82	1	ırsement For: Primary X General
Per Election for Office Sought	10	3437734.02	2024	Other (specify) ▶
(a) SUPTOTAL of Itamized Independent Evpanditures				47014.97
(a) SUBTOTAL of Itemized Independent Expenditures			•	47014.87
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
/ · === · · · · · · · · · · · · · · · ·				
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		5 -	M	0 16 2024
Signature		_ Date	e 1	0 10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 145 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	1 M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
IMGE LLC				10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				10 10 2021
			Amou	unt
City	State	Zip Code	— I []	27803.30
WASHINGTON	DC	20005	I	saction ID : SE24.764
Purpose of Expenditure		Catamani		of Disbursement or Obligation
TEXTING		Category/ Type		10 16 2024
Name of Federal Candidate:		Support	Office Sough	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	
Calendar Year-To-Date			Disburseme	
Per Election for Office Sought	10	5457794.82	2024 —	Other (specify) ▶
Full Name of Payee	,	□ Mama	<u> </u>	of Public Distribution/Dissemination
IMGE LLC		∐ Memo	item Date	M M / D D / Y Y Y Y
Maille et Andreas			— L	10 16 2024
Mailing Address 1401 H STREET NW STE 550			Amou	unt
	10	7. 0. 1		27902 20
City WASHINGTON	State	Zip Code		27803.29 saction ID : SE24.765
	DC	20005		of Disbursement or Obligation
Purpose of Expenditure		Category/		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
TEXTING		Type		
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date		alamina da d	Disburseme	nt For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				55606.59
.,				7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
			M = M /	D D / Y Y Y Y
GOBER, CHRIS, , ,		Date	10	16 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C cocorsono
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
IMGE LLC				10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1401 H STREET NW STE 550				Amount
			,	
City	State	Zip Code		101788.20
WASHINGTON	DC	20005		Transaction ID : SE24.766 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
TEXTING		Туре		10 16 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date	10	5457794.82		sement For: Primary X General
Per Election for Office Sought	7	3437794.62	2024	Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				
STE A				Amount
City	State	Zip Code		3445.00
DOVER	DE	19901		Transaction ID : SE24.411 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING		Type	_	10 01 2024
Name of Federal Candidate:		X Support	Office	Sought: X House District: 08
JUNGE, PAUL, , ,		Oppose	F	President Senate State: MI
Calendar Year-To-Date		576080.00		sement For: Primary X General
Per Election for Office Sought	7 7	370080.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures .			. •	105233.20
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •	
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Expenditures				
Linday panelty of parity Lagrify that the independen	at ovpopditures	reported berein were	not mag	do in accompation, consultation, or consort
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,			M = 1	M / D D / Y Y Y Y
Signature		Date	10	16 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 147 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C coccion
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN			Amou	int
STE A			Alliot	
City	State	Zip Code		3445.00
DOVER	DE	19901		saction ID : SE24.412 of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
PRINTING		Type	_	10 01 2024
Name of Federal Candidate:		Support	Office Sough	ht: X House District:08
MCDONALD, KRISTEN, , ,		Oppose	Presid	ent Senate State: MI
Calendar Year-To-Date		570000 00	Disburseme	nt For: Primary X General
Per Election for Office Sought	7-1-1-7-	576080.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC			_ I	M M / D D / Y Y Y Y
Mailing Address 8 THE GREEN				10 01 2024
STE A			Amou	int
City	State	Zip Code	ΗГ:	3445.00
DOVER	DE	19901		saction ID : SE24.413
Purpose of Expenditure		Category/		of Disbursement or Obligation
PRINTING		Type	_ [10 01 / 2024
Name of Federal Candidate:		X Support	Office Sough	ht: X House District: 07
BARRETT, TOM, , ,		Oppose	Presid	ent Senate State: MI
Calendar Year-To-Date		576598.00	Disburseme	nt For: Primary X General
Per Election for Office Sought	T T	370398.00	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			• I	6890.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• <u> </u>	
(c) TOTAL Independent Expenditures			→	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		_	M M /	01 / Y Y Y Y
Signature		_ Date	10	01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 148 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C State 15
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				
STE A			Amou	int
City	State	Zip Code		3445.00
DOVER	DE	19901		saction ID : SE24.414 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING		Type	_ L	10 01 2024
Name of Federal Candidate:		Support	Office Sough	ht: X House District:07
HERTEL, CURTIS, , ,		Oppose	Presid	lent Senate State: MI
Calendar Year-To-Date		570500.00	Disburseme	nt For: Primary X General
Per Election for Office Sought	7	576598.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC			П	10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				10 01 2321
STE A			Amou	ınt
City	State	Zip Code		3445.00
DOVER	DE	19901		saction ID : SE24.415 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING		Type	_ L	10 01 2024
Name of Federal Candidate:		X Support	Office Sough	ht: X House District: 10
JAMES, JOHN, , ,		Oppose	Presid	lent Senate State: MI
Calendar Year-To-Date		574006.00	Disburseme	nt For: Primary X General
Per Election for Office Sought	7	374006.00	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			• []	6890.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		-	
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Experialities			•	
Under penalty of perjury I certify that the independent	nt evnenditures	reported herein were	not made in	cooneration consultation or concert
with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,			M = M /	01 / Y Y Y Y Y
Signature		_ Date	10	01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 149 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				10 01 7 2024
STE A				Amount
City	State	Zip Code		3445.00
DOVER	DE	19901		Transaction ID : SE24.416 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 01 / 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 10
MARLINGA, CARL, , ,		Oppose		President Senate State: MI
Calendar Year-To-Date		574000.00		rsement For: Primary X General
Per Election for Office Sought	7	574006.00	2024	Other (specify) ►
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 8 THE GREEN STE A				Amount
City	State	Zip Code		18750.00
DOVER	DE	19901		Transaction ID : SE24.395 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date		5.45770.4.00		rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				22195.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M =	M / D D / Y Y Y Y
Signature		_ Date	e 10	01 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 150 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				G constant
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN			Amo	unt
STE A			Allio	
City	State	Zip Code		18750.00
DOVER	DE	19901		of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING		Type	_	10 01 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Presid	dent Senate State:
Calendar Year-To-Date	40	5.45770.4.00	Disburseme	ent For: Primary Kanada General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				10 02 2024
STE A			Amo	unt
City	State	Zip Code		6027.00
DOVER	DE	19901		nsaction ID : SE24.483
Purpose of Expenditure	1	Category/	Date	of Disbursement or Obligation
PRINTING/POSTAGE		Type	J L	10 / 04 / 2024
Name of Federal Candidate:		Support	Office Soug	ght: X House District:07
BARRETT, TOM, , ,		Oppose	Presid	dent Senate State: MI
Calendar Year-To-Date		576598.00	Disburseme	ent For: Primary Kanada General
Per Election for Office Sought	7 7	370398.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • [24777.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es		· -	
(c) TOTAL Independent Expenditures			· -	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M /	D D / Y Y Y Y Y
Signature		_ Date	e 10	01 2024

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES					PAGE 15	1 OF 224 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				1		TON NUMBER ▼
America PAC				С	C0087951	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	M = M /	D D /	Y Y Y Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	tem Date	of Public	Distribution 02	n/Dissemination
Mailing Address 8 THE GREEN						
STE A			Amo	ount		
City	State	Zip Code				6027.00
DOVER	DE	19901			D: SE24.48 rsement or	
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 /	04	2024
Name of Federal Candidate:		Support	Office Sou	aht: \(\sigma\)	House	District:07
HERTEL, CURTIS, , ,		Oppose		ident	Senate	State: MI
Calendar Year-To-Date Per Election for Office Sought	7	576598.00	Disbursem 2024	ent For:	Prima	ry X General
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	tem Date			n/Dissemination
Mailing Address 8 THE GREEN			Amo	10	02	2024
STE A			Amo	ount		
City DOVER	State DE	Zip Code 19901			D : SE24.4	
Purpose of Expenditure		Category/	Date	M M /	rsement or	/ Y Y Y Y
PRINTING/POSTAGE		Type		10	04	2024
Name of Federal Candidate:		X Support	Office Sou	ght:	House	District:08
JUNGE, PAUL, , ,		Oppose	Pres	ident	Senate	State: MI
Calendar Year-To-Date Per Election for Office Sought	, , ,	576080.00	Disbursem 2024	ent For: Other (sp	Prima	ry X General
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			• <u>C</u>	1 7		11924.50
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized	•				
CODED CHDIS			M = M	/ D D		YYY
GOBER, CHRIS, , ,		Date	10	04	20)24

TEMIZED INDEPENDENT EXPENDITURES				PAGE 152 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C State 15
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC			Г	10 02 7 2024
Mailing Address 8 THE GREEN			Amou	int
STE A			711100	
City	State	Zip Code		5897.50
DOVER	DE	19901		saction ID : SE24.486 of Disbursement or Obligation
Purpose of Expenditure		Category/		M
PRINTING/POSTAGE		Type	_	10 04 2024
Name of Federal Candidate:		Support	Office Sough	ht: X House District:08
MCDONALD, KRISTEN, , ,		Oppose	Presid	lent Senate State: MI
Calendar Year-To-Date		57000000	Disburseme	nt For: Primary X General
Per Election for Office Sought	7	576080.00	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				10 02 2024
STE A			Amou	ınt
City	State	Zip Code	— []	5379.00
DOVER	DE	19901		saction ID : SE24.487 of Disbursement or Obligation
Purpose of Expenditure		Category/		
PRINTING/POSTAGE		Type	-	10 / 04 / 2024
Name of Federal Candidate:		Support	Office Sough	ht: X House District: 10
JAMES, JOHN, , ,		Oppose	Presid	lent Senate State: MI
Calendar Year-To-Date		574000 00	Disburseme	nt For: Primary X General
Per Election for Office Sought	7	574006.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			→	11276.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· • []	
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidat party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M /	04 2024
Signature		_ Date	10	04 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 153 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo		"M / D "D / Y "Y "Y "Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item Date o	of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				10 32 232
STE A			Amour	nt
City	State	Zip Code		5379.00
DOVER	DE	19901		action ID : SE24.488 If Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 04 7 2024
Name of Federal Candidate:		Support	Office Sough	t: X House District:10
MARLINGA, CARL, , ,		Oppose	Preside	MI
Calendar Year-To-Date Per Election for Office Sought		574006.00	Disbursemen 2024 O	t For:
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address 8 THE GREEN STE A			Amour	
City	State	Zip Code	$ \Gamma$	108499.50
DOVER	DE	19901		action ID : SE24.630 of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type	M	10 11 2024
Name of Federal Candidate:		Support	Office Sough	t: District: 00
TRUMP, DONALD, , ,		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursemen 2024 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditures	·		· [113878.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res		• [
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		· ·
GOBER, CHRIS, , ,		_ Date	10	04 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 154 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				10 11 2024
STE A				Amount
City	State	Zip Code		12055.50
DOVER	DE	19901		Transaction ID : SE24.631 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		M M / D D / Y Y Y Y Y Y 11 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
ROGERS, MIKE, , ,		Oppose		President Senate State: MI
Calendar Year-To-Date			Disbu	rsement For: Primary X General
Per Election for Office Sought	7	12055.50	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				Amount
STE A				Amount
City	State	Zip Code		162991.00
DOVER	DE	19901		Transaction ID : SE24.632 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
				rsement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				175046.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	0 11 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 155 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
7				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				Amount
STE A				
City	State	Zip Code		162991.00
DOVER	DE	19901		Transaction ID : SE24.633 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
PRINTING/POSTAGE		Type		10 11 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date			Disbu	rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC			110111	M M / D D / Y Y Y Y
Mailing Address				10 16 2024
6 THE GREEN				Amount
STE A	State	Zip Code		69832.50
DOVER	DE	19901		Transaction ID : SE24.634
Purpose of Expenditure		19901		Date of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		10 / 11 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date			Disbu	rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				232823.50
				7
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(c) TOTAL Independent Expenditures				
				, , , , , , , , , , , , , , , , , , , ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CODED CHDIS			M	M / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10) 11 2024

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITORES				PAGE 156 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEĞIES LLC				10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				Amount
STE A				
City	State	Zip Code		69832.50
DOVER	DE	19901		Transaction ID : SE24.635 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Cupport	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Support Oppose		Sought: House District: 00 President Senate State:
Calendar Year-To-Date				rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				Amount
STE A				
City	State	Zip Code		162991.00
DOVER	DE	19901		Transaction ID : SE24.636 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 11 2024
		Туре		
Name of Federal Candidate:		X Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82	Disbur 2024	sement For: Primary K General
Per Election for Office Sought	7 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. ▶	232823.50
(1) 011DTOT11 (11 %) 11 11 1 1 1 5				
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(c) TOTAL Independent Expenditures				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				7 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5 -	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	11 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 157 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN			Am	oount
STE A	Ctata	Zin Codo	— г	162991.00
DOVER	State	Zip Code 19901	Tra	ansaction ID : SE24.637
				te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 11 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	
Calendar Year-To-Date			Disbursen	
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				
STE A			Am	ount
City	State	Zip Code		194517.00
DOVER	DE	19901		ansaction ID : SE24.651 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ught: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	
			Disbursen	
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				357508.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(c) TOTAL Independent Expenditures				
(,, , , , , , , , , , , , , , , , , , ,				7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
COBER CHRIS			М = М	/ D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	9 10	11 2024

PAGE 158 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee OSCEOLA STRATEGIES LLC 21 2024 Mailing Address 8 THE GREEN Amount STE A City State Zip Code 194517.00 **DOVER** DE 19901 Transaction ID: SE24.652 Date of Disbursement or Obligation Purpose of Expenditure Category/ PRINTING/POSTAGE 10 2024 Type Name of Federal Candidate: 00 Office Sought: Support House District: HARRIS, KAMALA, , , Oppose President Senate State: Primary Disbursement For: X General Calendar Year-To-Date 105457794.82 2024 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item OSCEOLA STRATEGIES LLC 2024 21 10 Mailing Address 8 THE GREEN Amount STE A 6027.00 City State Zip Code Transaction ID: SE24.708 **DOVER** DE 19901 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 PRINTING/POSTAGE Type Name of Federal Candidate: 07 X Support X House Office Sought: District: BARRETT, TOM, , , MI Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 576598.00 2024 Per Election for Office Sought Other (specify) ▶ 200544.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 15 10 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 159 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y = Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address o THE CREEN				10 21 7 2024
8 THE GREEN STE A				Amount
City	State	Zip Code		6027.00
DOVER	DE	19901		Transaction ID : SE24.709 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 07
HERTEL, CURTIS, , ,		Oppose		President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	7 7	576598.00	Disbur 2024	sement For: Primary
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC			itom	10 21 2024
Mailing Address 8 THE GREEN				Amount
STE A		T		
DOVER	State	Zip Code 19901		5897.50 Transaction ID : SE24.710
Purpose of Expenditure		Cotomony		Date of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		10 / 15 / Y 2024
Name of Federal Candidate:		X Support	Office	Sought: X House District:08
JUNGE, PAUL, , ,		Oppose		President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	1 1 1	576080.00	Disbur 2024	sement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures				11924.50
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_	M	M / D D / Y Y Y Y
Signature		_ Date	9 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 160 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN				Amount
STE A City	State	Zip Code		5897.50
DOVER	DE	19901		Transaction ID : SE24.711
Purpose of Expenditure PRINTING/POSTAGE		Category/	\neg	Date of Disbursement or Obligation
FRINTING/FOSTAGE		Type		10 13 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 08
MCDONALD, KRISTEN, , ,		Oppose		President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		576080.00	Disbur 2024	sement For: Primary X General
Fer Election for Office Sought	7 1 7	7 171 181	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
OSCEOLA STRATEGIES LLC				10 21 7 2024
Mailing Address 8 THE GREEN				Amount
STE A				
City DOVER	State	Zip Code 19901		5379.00 Transaction ID : SE24.712
Purpose of Expenditure		Ontonomi		Date of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		10 15 2024
Name of Federal Candidate:		X Support	Office	Sought: X House District: 10
JAMES, JOHN, , ,		Oppose		President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		574006.00	Disbur 2024	sement For: Primary X General
The second secon	7			Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				11276.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_		M / D D / Y Y Y Y Y
Signature		_ Date	e 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 161 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	1
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item [Date of Public Distribution/Dissemination
Mailing Address 8 THE GREEN				10 21 2024
STE A			l A	Amount
City	State	Zip Code		5379.00
DOVER	DE	19901	I	Fransaction ID : SE24.713 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	Sought: X House District: 10
MARLINGA, CARL, , ,		No Oppose	P	resident Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	7 7	574006.00	Disburs 2024	ement For: ☐ Primary ☒ General Other (specify) ▶
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item [Date of Public Distribution/Dissemination
Mailing Address				10 / 18 / 2024
8 THE GREEN STE A			P	Amount
City	State	Zip Code		139665.00
DOVER	DE	19901		Transaction ID : SE24.724 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 / 16 / Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburs 2024	ement For: ☐ Primary ☒ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. [145044.00
(a) SSS TO TAL OF ROTHERS IN HOSPORISON EXPONENTIAL			, F	7
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		_ Date	M N	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TILIMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC	DENTIFICATION NUMBER ▼
America PAC			C	C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	/ D D / Y Y Y Y
Full Name of Payee OSCEOLA STRATEGIES LLC		☐ Memo	Item Date of Pu	blic Distribution/Dissemination
Mailing Address 8 THE GREEN			Amount	13 2024
STE A		7. 0. 1		40750.00
City DOVER	State DE	Zip Code 19901		19750.00 on ID : SE24.725 sbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type	10	/ 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District:00
TRUMP, DONALD, , ,		Oppose	President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursement For 2024 Other	:: Primary ⊠ General (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Pu	blic Distribution/Dissemination
OSCEOLA STRATEGIES LLC			10 ^M	/ 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8 THE GREEN STE A			Amount	
City DOVER	State DE	Zip Code 19901	Transaction	19750.00 on ID : SE24.726
Purpose of Expenditure PRINTING	1	Category/ Type	Date of Dis	sbursement or Obligation 16 2024
Name of Federal Candidate:		Support	Office Sought:	House District: 00
HARRIS, KAMALA, , ,		Oppose	President	Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursement For 2024 Other	r: Primary X General (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			.	39500.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	, , , , , , ,
(c) TOTAL Independent Expenditures			•	, , , , , , , , , , , , , , , , , , ,
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		5	M M / D 16	D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10 16	2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
PATRIOT GRASSROOTS LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1256 N RANGE RIDER PLACE				Amount
City	State	Zip Code		1140000.00
VAIL	AZ	85641		Transaction ID : SE24.496 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 10	5457794.82	Disbu 2024	rsement For: Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
PATRIOT GRASSROOTS LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1256 N RANGE RIDER PLACE				Amount
City	State	Zip Code		1140000.00
VAIL	AZ	85641		Transaction ID : SE24.497 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date		5.45770.4.00	1	rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	2280000.00
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		5	M =) 04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	, 04 2024

				PAGE 104 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y Y
Full Name of Payee PATRIOT GRASSROOTS LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1256 N BANGE DIDER DI ACE				10
1256 N RANGE RIDER PLACE				Amount
City	State	Zip Code		8665.00
VAIL	AZ	85641		Transaction ID : SE24.491 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type	П	M M / D D / Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
Name of Federal Candidate:				
TRUMP, DONALD, , ,		Support Oppose		President Senate State:
Calendar Year-To-Date				rresident General State. General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
PATRIOT GRASSROOTS LLC				10 02 7 2024
Mailing Address 1256 N RANGE RIDER PLACE				Amount
City	State	Zip Code		8665.00
VAIL	AZ	85641		Transaction ID : SE24.492
Purpose of Expenditure		Cotogony	_	Date of Disbursement or Obligation
CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbu 2024	rrsement For: Primary X General
rei Liection for Office Sought	7 7		2021	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				17330.00
(a) SOBTOTAL OF Remized independent Expenditures				1730.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es			
(c) TOTAL Independent Expenditures				
(•)				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	e 1	0
Signature		_ Date	<u>ٔ</u> ا	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 165 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				O
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
PUSH DIGITAL LLC				10 / 11 / 2024
Mailing Address 342 WEST BAY STREET			Ar	nount
City	State	Zip Code	-	185833.34
CHARLESTON	SC	29401		ransaction ID : SE24.638 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type		10 11 2024
Name of Federal Candidate:		X Support	Office Sc	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date	40	VE 457704 00		ment For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
PUSH DIGITAL LLC				10 11 2024
Mailing Address 342 WEST BAY STREET				
			Ar	nount
City	State	Zip Code		185833.33
CHARLESTON	SC	29401		ransaction ID : SE24.639 ate of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y
DIGITAL MEDIA		Туре		10 11 2024
Name of Federal Candidate:		Support	Office Sc	ought: House District: 00
HARRIS, KAMALA, , ,		X Oppose	X Pre	esident Senate State:
Calendar Year-To-Date	10	5457794.82	1	ment For: Primary X General
Per Election for Office Sought	7		2024	Other (specify) ▶
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			· • L	371666.67
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			, г	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		-	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 166 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				10 11 2024
Mailing Address 342 WEST BAY STREET				Amount
City	State	Zip Code		200000.00
CHARLESTON	SC	29401		Transaction ID : SE24.640 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Type	4	10 11 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	, 10	5457794.82	Disbur 2024	sement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 342 WEST BAY STREET				
				Amount
City	State	Zip Code		200000.00
CHARLESTON	SC	29401		Transaction ID : SE24.641 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
DIGITAL MEDIA		Туре		10 11 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82	1	sement For: Primary X General
Per Election for Office Sought	10	0407704.02	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·			400000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures				
				7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		5 -	M = 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 167 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 342 WEST BAY STREET				Amount
City	State	Zip Code		133333.34
CHARLESTON	sc	29401		Transaction ID : SE24.607 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL MEDIA	I	Category/ Type		10 / 11 / 2024
Name of Federal Candidate:			Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date				rsement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				M M / D D / Y Y Y Y
Mailing Address 342 WEST BAY STREET				10 10 2024
342 WEST BAT STREET				Amount
City	State	Zip Code		133333.33
CHARLESTON	SC	29401		Transaction ID : SE24.608 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	\neg	M M / D D / Y Y Y Y
DIGITAL MEDIA		Туре		10 11 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	10	5457794.82	1	sement For: Primary X General
Per Election for Office Sought	7	3437794.02	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	26666.67
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CORED CHDIS			M =	M / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	11 2024

TEMPLES INDEX ENDERY EXILENDITORES				PAGE 100 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
· · ·				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 342 WEST BAY STREET				10 11 2024
OLE WEST BATTOTALET				Amount
City	State	Zip Code		237250.00
CHARLESTON	SC	29401		Transaction ID : SE24.600
Purpose of Expenditure				Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		10 11 2024
Name of Federal Candidate:		X Support	Office	e Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	\times	President Senate State:
Calendar Year-To-Date			1	ursement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
PUSH DIGITAL LLC				10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 342 WEST BAY STREET				10 11 2024
342 WEST BAT STREET				Amount
City	State	Zip Code		237250.00
CHARLESTON	SC	29401		Transaction ID : SE24.601
Purpose of Expenditure				Date of Disbursement or Obligation
DIGITAL MEDIA		Category/ Type		10 11 / 2024
Name of Federal Candidate:		Support	Office	e Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date		alesta de la constanta de la c	Disbu	ursement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				474500.00
			ŕ	
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
				, , , , , , , , , , , , , , , , , , , ,
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
Signature		_ Date	e 1	0 11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 169 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET				10 16 2024
STE 310			Amo	ount
City	State	Zip Code		194981.00
HARRISBURG	PA	17102		nsaction ID : SE24.505 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 07 2024
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pres	
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursem 2024	
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				
STE 310			Amo	ount
City	State	Zip Code		194981.00
HARRISBURG	PA	17102	-	Insaction ID : SE24.506 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pres	
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursem 2024	ent For:
				Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	S		•	389962.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	e 10	07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 170 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				10 23 7 2024
1426 N 3RD STREET STE 310				Amount
City	State	Zip Code		194981.00
HARRISBURG	PA	17102		Transaction ID : SE24.507 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M = M / 07 / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disbur 2024	sement For: Primary X General
				Other (specify) ▶
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET				
STE 310				Amount
City	State	Zip Code		194981.00
HARRISBURG	PA	17102		Transaction ID : SE24.508 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 07 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	l	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbur 2024	sement For: Primary General
,	1			Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures				389962.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CORED CHDIS			М	M / D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	07 2024

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES					PAGE 171	OF 224 4 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u> </u>		
America PAC						ON NUMBER ▼
America i Ac				C	C00879510	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M /	D D /	Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item Date	of Public	Distribution/	Dissemination 2024
Mailing Address 1426 N 3RD STREET				10	12	2024
STE 310			Amo	ount		
City	State	Zip Code	-			566451.00
HARRISBURG	PA	17102			D : SE24.588 rsement or O	
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M /	10	2024
Name of Federal Candidate:		Support	Office Sou	aht:	House	District:00
TRUMP, DONALD, , ,		Oppose	X Pres	_	Senate	State:
0.1.1.W. 7.0.1			Disbursem		Primary	
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	2024	Other (sp		General
Full Name of Payee		☐ Memo	Item Date	of Public	Distribution/	Dissemination
RED MAVERICK MEDIA LLC				M M /	17	2024
Mailing Address 1426 N 3RD STREET			Amo	ount		
STE 310						
City	State	Zip Code				283225.50
HARRISBURG	PA	17102	I		ID: SE24.591 rsement or O	
Purpose of Expenditure	1	Category/		M M /	D D /	YYYY
PRINTING/POSTAGE		Type	_	10	10	2024
Name of Federal Candidate:		X Support	Office Sou	ght:	House	District:00
TRUMP, DONALD, , ,		Oppose	X Pres		Senate	State:
Calendar Year-To-Date			Disbursem	ent For:	Primary	X General
Per Election for Office Sought	10	05457794.82	2024	Other (sp		
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			, F		7	849676.50
(b) GOBTOTAL OF OTHER MIZE OF INDEPENDENT EXPENDITION	03		•			
(c) TOTAL Independent Expenditures			•	7		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
CODED CUDIS			M = M	/ D D		Y Y
GOBER, CHRIS, , ,		_ Date	e 10	10	202	4

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 172 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼ C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET			Amo	
STE 310	<u> </u>	1		
City HARRISBURG	State PA	Zip Code 17102		283225.50 nsaction ID : SE24.592 of Dishuspement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	Date	e of Disbursement or Obligation 10 10 2024
Name of Federal Candidate: HARRIS, KAMALA, , ,		Support	Office Sou	
MANNIO, MAIVIALA, , ,		> Oppose	X Presi	
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disburseme 2024	ent For:
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET STE 310			Amo	ount
City HARRISBURG	State PA	Zip Code 17102		566451.00 Insaction ID : SE24.593 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	1	Category/ Type		10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: TRUMP, DONALD, , ,		Support Oppose	Office Sou	
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disburseme	
(a) SUBTOTAL of Itemized Independent Expenditures			· [849676.50
(b) SUBTOTAL of Unitemized Independent Expenditur	'es		•	7
(c) TOTAL Independent Expenditures			• [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	e 10	10 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 173 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET				10 14 2024
STE 310				Amount
City	State	Zip Code		101324.00
HARRISBURG	PA	17102		Transaction ID : SE24.594 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82		rsement For: Primary X General
Tot Election for Office Sought	7 7			Other (specify) ►
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET				
STE 310				Amount
City	State	Zip Code		101324.00
HARRISBURG	PA	17102		Transaction ID : SE24.595 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 10 7 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date	10	5457794.82	Disbur	rsement For: Primary X General
Per Election for Office Sought	1	0407734.02	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				202648.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
CODED CHING			M	M / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	10 2024

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on , , , , , , , , , , , , , , , , , , ,
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1426 N 2PD STREET				10 15 2024
1426 N 3RD STREET STE 310				Amount
City	State	Zip Code		806.50
HARRISBURG	PA	17102		Transaction ID : SE24.691 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
PRINTING		Туре		10 15 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbu 2024	rsement For:
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				
STE 310				Amount
City	State	Zip Code		806.50
HARRISBURG	PA	17102		Transaction ID : SE24.692 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 / 15 / 2024
Name of Federal Candidate:		Curanant	0#:	Sought: Diouse District: 00
HARRIS, KAMALA, , ,		Support Oppose		House District.
, , , , , , , , , , , , , , , , , , ,		S Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbu	rsement For: Primary X General
Tot Election for Office Cought	7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	1613.00
(1) OUDTOTAL (1) 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidar party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		_	M =	M / D D / Y Y Y Y
Signature		_ Date	e 10	15 2024

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 175 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				10 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET			An	nount
STE 310				
City	State	Zip Code		116900.00
HARRISBURG	PA	17102	I	ansaction ID : SE24.757 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Co	ught: House District: 00
TRUMP, DONALD, , ,		Support Oppose	Office So	• 🗀
Calendar Year-To-Date			Disburser	
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ►
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				
STE 310			An	nount
City	State	Zip Code		116900.00
HARRISBURG	PA	17102	I	tansaction ID: SE24.758 te of Disbursement or Obligation
Purpose of Expenditure		Category/		10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		10 10 2024
Name of Federal Candidate:		Support	Office So	ught: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	sident Senate State:
Calendar Year-To-Date	10	5457794.82	Disburser	ment For: Primary X General
Per Election for Office Sought	1	0407704.02	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • _	233800.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures				
()				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		5 -	M = M	16 2024
Signature		_ Date	e 10	10 2024

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITORES				PAGE 176 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				10 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				Amount
STE 310				
City	State	Zip Code		177982.00
HARRISBURG	PA	17102		Transaction ID : SE24.759 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Турс		
Name of Federal Candidate:		X Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburs 2024	ement For: ☐ Primary ☐ General Other (specify) ▶
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1426 N 3RD STREET				
STE 310			<i>F</i>	Amount
City	State	Zip Code		101019.00
HARRISBURG	PA	17102	I	Transaction ID : SE24.739 Date of Disbursement or Obligation
Purpose of Expenditure	•	Category/		10 16 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
COLLATERAL MATERIALS- SIGNS		Type		10 10 2024
Name of Federal Candidate:		X Support	Office 5	Sought: House District:00
TRUMP, DONALD, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date	10	5457794.82		ement For: Primary X General
Per Election for Office Sought	1	0407704.02	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	279001.00
			Г	
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures			[
, ,				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		5 -	M = N	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	16 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 177 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 1426 N 3RD STREET				10 10 2024
STE 310			Amo	unt
City	State	Zip Code	— F	58560.00
HARRISBURG	PA	17102		saction ID : SE24.740
Purpose of Expenditure COLLATERAL MATERIALS- SIGNS		Category/ Type	Date	of Disbursement or Obligation 10 16 2024
Name of Federal Candidate:			Office Soug	aht: House District: 00
TRUMP, DONALD, , ,		Oppose	President	
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburseme 2024	ent For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
THE BAKER GROUP LLC				M M / D D / Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			Amo	10 07 2024
	T-			
City BRENTWOOD	State TN	Zip Code 37027	Trai	30200.00 nsaction ID : SE24.489
Purpose of Expenditure		Category/	Date	of Disbursement or Obligation
PRINTING		Type	_	10 04 7 2024
Name of Federal Candidate:		Support	Office Soug	ght: House District:00
TRUMP, DONALD, , ,		Oppose	X Presi	
Calendar Year-To-Date			Disburseme	ent For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			· -	88760.00
(,,				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M /	16 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 178 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				Amount
City	State	Zip Code		30200.00
BRENTWOOD	TN	37027		Transaction ID : SE24.490 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 / 04 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date				sement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify)
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				M M / D D / Y Y Y Y
Mailing Address 446 WILL CON DIKE CIRCLE				10 07 2024
416 WILSON PIKE CIRCLE				Amount
City	State	Zip Code		262146.00
BRENTWOOD	TN	37027		Transaction ID : SE24.463 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		10 04 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date	40	5.45770.4.00	Disbur	sement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
·				
(a) SUBTOTAL of Itemized Independent Expenditures				292346.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CODED CHOIC			M =	M / D D / Y Y Y Y
GOBER, CHRIS, , , Signature		Date	e 10	04 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 179 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				Amount
City	State	Zip Code		262146.00
BRENTWOOD	TN	37027	I .	Transaction ID : SE24.464 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 04 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date				sement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				M M / D D / Y Y Y
Mailing Address 446 WILL CON DIKE CIRCLE				10 10 2024
416 WILSON PIKE CIRCLE				Amount
City	State	Zip Code		147853.50
BRENTWOOD	TN	37027		Transaction ID : SE24.511 Date of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		10 08 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date	40	5457704.00	1	sement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				409999.50
(b) SUBTOTAL of Unitemized Independent Expenditur	es			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
CODED CHDIS			M = 1	W / D D / Y Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	04 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 180 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	N " M
Full Name of Payee		Memo	Item [Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			,	Amount
City	State	Zip Code		147853.50
BRENTWOOD	TN	37027		Transaction ID : SE24.512 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 08 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
HARRIS, KAMALA, , ,		Support Oppose		resident Senate State:
Colondor Vern To Date		Z		ement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	, 10	5457794.82	2024	Other (specify)
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 11 2024
Mailing Address 416 WILSON PIKE CIRCLE			,	Amount
City	State	Zip Code		261831.50
BRENTWOOD	TN	37027		Transaction ID : SE24.522 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		10 03 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date	40	VE 45770 4 00		ement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	409685.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures				
				, ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_	M	/ D D / Y Y Y Y
Signature		_ Date	e 10	08 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 181 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 416 WILSON PIKE CIRCLE				10 11 2024 Amount
City	State	Zip Code		261831.50
BRENTWOOD	TN	37027		Transaction ID : SE24.523 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 00
HARRIS, KAMALA, , ,		Support Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbur 2024	rsement For: Primary
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				Amount
City	State	Zip Code		261280.00
BRENTWOOD	TN	37027		Transaction ID : SE24.714 Date of Disbursement or Obligation
Purpose of Expenditure	•	Category/		M M / D D / Y Y Y
PRINTING/POSTAGE		Type		10 15 2024
Name of Federal Candidate:		X Support	Office	Sought: House District:00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbur 2024	rsement For: Primary General Other (specify) ▶
	,			
(a) SUBTOTAL of Itemized Independent Expenditures				523111.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Dote	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 182 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				O
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 17 2024
Mailing Address 416 WILSON PIKE CIRCLE			An	nount
City	State	Zip Code	— г	261280.00
BRENTWOOD	TN	37027	Tr	ansaction ID : SE24.715
Purpose of Expenditure			Da	ate of Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type		10 15 7 2024
Name of Federal Candidate:		Support	Office So	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date			Disburser	ment For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				10 23 2024
410 WESONT INC CINCLE			An	nount
City	State	Zip Code		74925.00
BRENTWOOD	TN	37027		ransaction ID : SE24.760 ate of Disbursement or Obligation
Purpose of Expenditure	1	Category/		M M / D D / Y Y Y Y
PRINTING		Type		10 16 2024
Name of Federal Candidate:		X Support	Office So	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	X Pre	esident Senate State:
Calendar Year-To-Date	10	5457794.82		ment For: Primary X General
Per Election for Office Sought	7		2024	Other (specify) ▶
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			· • _	336205.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures				
(c) 10 112 maoponasm Exponentials				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	9 10	15 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 183 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item D	Pate of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE			А	mount
City	State	Zip Code		74925.00
BRENTWOOD	TN	37027		ransaction ID : SE24.761 Pate of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 16 2024
Name of Federal Candidate:		Support	Office S	ought: House District: 00
HARRIS, KAMALA, , ,		Oppose		resident Senate State:
Calendar Year-To-Date				ement For: Primary X General
Per Election for Office Sought	10	05457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item D	Pate of Public Distribution/Dissemination
THE BAKER GROUP LLC				10 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 416 WILSON PIKE CIRCLE				mount
				mount
City BRENTWOOD	State	Zip Code		36750.00 Fransaction ID: SE24.762
	TN	37027	I	Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office S	ought: House District: 00
TRUMP, DONALD, , ,		Oppose	Pi	resident Senate State:
Calendar Year-To-Date			Disburse	ement For: Primary X General
Per Election for Office Sought	10)5457794.82	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	111675.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(c) TOTAL Independent Expenditures			Г	
(,,			_	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M = M	/ D D / Y Y Y Y Y Y
Signature		_ Date	e 10	16 2024

TIENNIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y
Full Name of Payee THE BAKER GROUP LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address 416 WILSON PIKE CIRCLE			Amour	لىنىا لىا ك
City	State	Zip Code	— I I .	36750.00
BRENTWOOD	TN	37027		action ID : SE24.763 If Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type	M	10 16 / Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	t: House District: 00
HARRIS, KAMALA, , ,		X Oppose	X Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbursement 2024 O	t For:
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
THE LUKENS COMPANY			M	10 03 7 2024
Mailing Address 2800 SHIRLINGTON ROAD			Amour	
STE 900			Amour	11
City	State	Zip Code		19293.00
ARLINGTON Purpose of Expenditure	VA	22206		action ID : SE24.465 If Disbursement or Obligation
PRINTING/POSTAGE		Category/ Type	M	10 04 2024
Name of Federal Candidate:		X Support	Office Sough	t: X House District:13
COUGHLIN, KEVIN, , ,		Oppose	Preside	ent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7	1033567.73	Disbursement 2024 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditures	·		.	56043.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· [
(c) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
GOBER, CHRIS, , ,		5 :	M = M /	16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10	2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 185 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo		W = M / D = D / Y = Y = Y = Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			Amou	
STE 900				
City ARLINGTON	State VA	Zip Code 22206	I	19293.00 saction ID : SE24.466
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	Date	of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: SYKES, EMILIA, , ,		Support	Office Soug	
OTALO, LIMILIA, , ,		Oppose	Presid	deni Senate State.
Calendar Year-To-Date Per Election for Office Sought	7 1 7	1033567.73	Disburseme 2024	ent For: Primary
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900			Amou	unt
City ARLINGTON	State VA	Zip Code 22206		11887.00 nsaction ID : SE24.467 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	1	Category/ Type		10 04 7 2024
Name of Federal Candidate: KENT, JOE, , ,		Support Oppose	Office Soug	\\\\\
Calendar Year-To-Date Per Election for Office Sought	7	635211.89	Disburseme	ont For:
(a) SUBTOTAL of Itemized Independent Expenditures			· [31180.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M /	04 2024
0: 1		_ Date		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 186 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				0 ,
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
THE LUKENS COMPANY				10 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD			Amo	Dunt
STE 900				Juli
City	State	Zip Code		11887.00
ARLINGTON	VA	22206		nsaction ID : SE24.468 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M - M / D - D / Y - Y - Y - Y
PRINTING/POSTAGE		Type	_	10 04 2024
Name of Federal Candidate:		Support	Office Sou	ght: X House District:03
GLUESENKAMP PEREZ, MARIE, , ,		Oppose	Pres	ident Senate State: WA
Calendar Year-To-Date		005044.00	Disbursem	ent For: Primary X General
Per Election for Office Sought	7-1-1-7-	635211.89	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination
THE LUKENS COMPANY				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				10 00 2024
STE 900			Am	ount
City	State	Zip Code		24760.00
ARLINGTON	VA	22206		e of Disbursement or Obligation
Purpose of Expenditure		Category/	Date	M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type	_	10 04 2024
Name of Federal Candidate:		Support	Office Sou	ght: X House District:07
KEAN, TOM, , ,		Oppose	Pres	ident Senate State: NJ
Calendar Year-To-Date		700074.77	Disbursem	ent For: Primary X General
Per Election for Office Sought	7 7 -	762074.77	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				36647.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· •	
, , <u></u>				
(c) TOTAL Independent Expenditures	•••••		· •	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		_	M = M	/ D D / Y Y Y Y
Signature		_ Date	e 10	04 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 187 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo		of Public Distribution/Dissemination
Mailing Address			— L	10 08 2024
2800 SHIRLINGTON ROAD STE 900			Amour	nt
City	State	Zip Code	— I.	24760.00
ARLINGTON	VA	22206	I	action ID : SE24.470
Purpose of Expenditure PRINTING/POSTAGE	1	Category/ Type		of Disbursement or Obligation
Name of Federal Candidate:		Support	Office Sough	t: X House District: 07
ALTMAN, SUE, , ,		Oppose	Preside	N.I
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	762074.77	Disbursement 2024 O	t For:
Full Name of Payee THE LUKENS COMPANY		☐ Memo	1 _	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			─	10 08 2024
STE 900			Amour	nt
City ARLINGTON	State VA	Zip Code 22206	Trans	15220.00 saction ID : SE24.471
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		of Disbursement or Obligation
Name of Federal Candidate:		Support	Office Sough	t: X House District: 02
THERIAULT, AUSTIN, , ,		Oppose	Preside	ME
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	772683.43	Disbursement 2024	t For: Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu (c) TOTAL Independent Expenditures	ires		· [:	39980.00
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			the reporting entity is not a political
GOBER, CHRIS, , ,		Date	10	04 2024

TEMIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo		of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			Amou	10 08 2024
STE 900				
City ARLINGTON	State VA	Zip Code 22206	I	action ID : SE24.472 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 / 04 / 2024
Name of Federal Candidate:		Support	Office Sough	t: X House District: 02
GOLDEN, JARED, , ,		Oppose	Preside	ent Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	, , ,	772683.43	Disbursemen 2024 O	t For:
Full Name of Payee		Memo	Item Date of	of Public Distribution/Dissemination
THE LUKENS COMPANY				10 11 2024
Mailing Address 2800 SHIRLINGTON ROAD			Amou	nt .
STE 900			Amou	
City ARLINGTON	State VA	Zip Code 22206	I	21684.00 saction ID : SE24.473 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	Date	10 04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:			0.00	t: V Hausa Diatriat: 45
STEEL, MICHELLE, , ,		Support Oppose	Office Sough	n. Nouse District.
Calendar Year-To-Date Per Election for Office Sought	7 7	1074401.97	Disbursemen 2024 O	t For:
(a) SUBTOTAL of Itemized Independent Expenditures.			.	36904.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		.	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	e or authorized	•		•
GOBER, CHRIS, , ,		Data	10	04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	10	2027

TEMIZED INDEPENDENT EXPENDITORES				PAGE 189 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
THE LUKENS COMPANY				10 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD			A	mount
STE 900				
City	State	Zip Code	<u> </u>	21684.00
ARLINGTON	VA	22206		ransaction ID : SE24.474 ate of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:			000	aught: Muse District: 45
TRAN, DERRICK, , ,		Support Oppose	Office S	ought: House District: 45 esident Senate State: CA
Calendar Year-To-Date			Disburse	ement For: Primary X General
Per Election for Office Sought	7 7	1074401.97	2024	Other (specify)
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
THE LUKENS COMPANY				10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				maunt
STE 900				mount
City	State	Zip Code		21603.00
ARLINGTON	VA	22206		Transaction ID : SE24.475 ate of Disbursement or Obligation
Purpose of Expenditure		Category/		10 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		
Name of Federal Candidate:		X Support	Office S	ought: House District: 41
CALVERT, KEN, , ,		Oppose	Pr	esident Senate State: CA
Calendar Year-To-Date		1277455.72	1	ement For: Primary X General
Per Election for Office Sought	7 - 7		2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· - L	43287.00
(I) OUDTOTAL of Units are in additional form and its area.			Г	
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(c) TOTAL Independent Expenditures				
			, ,	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
GOBER, CHRIS, , ,		D-1-	M = M 10	04 2024
Signature		_ Date	3 10	07 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 190 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 000073310
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	" M / D " D / Y " Y " Y " Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	M	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				10 08 2024
STE 900			Amour	nt
City	State	Zip Code		21603.00
ARLINGTON	VA	22206	I	action ID : SE24.476 If Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 04 2024
Name of Federal Candidate:		Support	Office Sough	t: X House District: 41
ROLLINS, WILL, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1277455.72	Disbursement 2024	t For: Primary X General
Full Name of Payee		Memo	1 _	of Public Distribution/Dissemination
THE LUKENS COMPANY			М	10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				10 00 2024
STE 900			Amour	nt
City	State	Zip Code	-11:	13484.00
ARLINGTON	VA	22206	Trans	action ID: SE24.477 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 04 2024
Name of Federal Candidate:		X Support	Office Sough	t: X House District: 22
VALADAO, DAVID, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7	809994.44	Disbursement	t For: Primary X General
				unor (specify) F
(a) SUBTOTAL of Itemized Independent Expenditures	S		· [35087.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M /	04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 191 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900		1		
City ARLINGTON	State VA	Zip Code 22206		13484.00 Transaction ID : SE24.478
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		Date of Disbursement or Obligation 10 04 2024
Name of Federal Candidate: SALAS, RUDY, , ,		Support		Sought: House District: 22
G. K. J. K. G. F. F. K. G. F.		Oppose		Fresident Senate State.
Calendar Year-To-Date Per Election for Office Sought	, , ,	809994.44	Disburs 2024	sement For: Primary
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900				Amount
City ARLINGTON	State VA	Zip Code 22206		17201.25 Transaction ID : SE24.479 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 04 7 2024
Name of Federal Candidate: NUNN, ZACH, , ,		Support Oppose		Sought: House District: 03 President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	402525.90	Disburs 2024	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures	·		•	30685.25
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y
OCOLER, CHRIS, , ,		_ Date	10	04 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 192 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	M	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			L	10 08 2024
STE 900			Amour	nt
City	State	Zip Code		17201.25
ARLINGTON	VA	22206	I	action ID : SE24.480 If Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10
Name of Federal Candidate:		Support	Office Sough	t: X House District: 03
BACCAM, LANON, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	402525.90	Disbursement 2024 O	t For: Primary
Full Name of Payee		☐ Memo	1 _	of Public Distribution/Dissemination
THE LUKENS COMPANY			М	10 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				10 00 2024
STE 900			Amour	nt
City	State	Zip Code	-1:	16842.50
ARLINGTON	VA	22206	Trans	saction ID : SE24.481 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10
Name of Federal Candidate:		X Support	Office Sough	t: X House District: 09
MERRIN, DERRICK, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	1 1 1 1	832697.30	Disbursement 2024	t For: Primary X General
	,			ther (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	3		•	34043.75
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M /	04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

GOBER, CHRIS, , ,

Signature

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 193 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
· · · ·				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	port Amends repo	ort filed or	1
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item [Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900				Mount
City	State	Zip Code		16842.50
ARLINGTON	VA	22206		Transaction ID : SE24.482 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10
Name of Federal Candidate:		Support	Office S	Sought: X House District:09
KAPTUR, MARCY, , ,		∑ Oppose		resident Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		832697.30	Disburs 2024	ement For: ☐ Primary ☐ General Other (specify) ▶
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD			Α.	Amount
STE 900		T =: 0 :		207054.00
City ARLINGTON	State VA	Zip Code 22206		267054.00 Transaction ID : SE24.462
Purpose of Expenditure		Category/		Date of Disbursement or Obligation
PRINTING/POSTAGE		Type		10 04 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose	X P	resident Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disburs 2024	ement For: ☐ Primary ☐ General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	\$		• •	283896.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			

2024

04

10

Date

TIENIZED INDEFENDENT EXPENDITORES				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	1 M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	_	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			Amou	10 08 2024
STE 900			Amou	ant.
City	State	Zip Code		308970.00
ARLINGTON Burness of Evpanditure	VA	22206	I	saction ID : SE24.453 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	$\Box \mid \Box$	10 04 7 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	, 10	5457794.82	Disburseme	nt For:
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
THE LUKENS COMPANY				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				
STE 900			Amou	ınt
City	State	Zip Code		52422.69
ARLINGTON	VA	22206	I	saction ID : SE24.454 of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 / 04 / 2024
Name of Federal Candidate:		Support	Office Soug	ht: House District: 00
TRUMP, DONALD, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburseme	nt For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [361392.69
(b) SUBTOTAL of Unitemized Independent Expenditur	'es		•	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized	•		•
GOBER, CHRIS, , ,		5 :	M M /	04 2024
Signature		_ Date	10	04 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 195 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Date o	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900			Amour	nt
City	State	Zip Code	— I	52422.69
ARLINGTON	VA	22206		action ID : SE24.455 of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 04 2024
Name of Federal Candidate:		Support	Office Sough	t: House District:00
HARRIS, KAMALA, , ,		∑ Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disbursemen 2024 O	t For:
Full Name of Payee THE LUKENS COMPANY		☐ Memo		of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900			Amour	nt
City ARLINGTON	State VA	Zip Code 22206		15111.44 saction ID : SE24.567 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE	1	Category/ Type		10 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: VALADAO, DAVID, , ,		Support Oppose	Office Sough	C^
Calendar Year-To-Date Per Election for Office Sought	7	809994.44	Disbursemen 2024 O	t For: ☐ Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures			· [67534.13
(b) SUBTOTAL of Unitemized Independent Expenditur	es		• []	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	10	04 2024

TEMPLES INSELLINSELLI EXILENSITORES				PAGE 190 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
, ,				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				
STE 900				Amount
City	State	Zip Code		15111.44
ARLINGTON	VA	22206		Transaction ID : SE24.568 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		10 10 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 22
SALAS, RUDY, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		809994.44	1	ursement For: Primary X General
Per Election for Office Sought	7 7	809994.44	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				
STE 900				Amount
City	State	Zip Code		24210.00
ARLINGTON	VA	22206		Transaction ID : SE24.569 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type	_	10 10 2024
Name of Federal Candidate:		X Support	Office	e Sought:
CALVERT, KEN, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		1277455.72		ursement For: Primary X General
Per Election for Office Sought	7 7	1277-100.72	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	39321.44
(b) SUBTOTAL of Unitemized Independent Expenditur	es			7 7 7
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
GOBER, CHRIS, , ,		Б.	M	0 10 2024
Signature		_ Date	e 1	0 10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 197 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
THE LUKENS COMPANY				M M / D D / Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD			Am	10 09 2024
STE 900	1 -	I		
City	State	Zip Code		24210.00
ARLINGTON	VA	22206	I	ansaction ID : SE24.570 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 10 7 2024
Name of Federal Candidate:		Support	Office So	ught: X House District: 41
ROLLINS, WILL, , ,		∑ Oppose		sident Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 7	1277455.72	Disburser 2024	ment For:
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
THE LUKENS COMPANY				10 09 2024
Mailing Address 2800 SHIRLINGTON ROAD			Am	nount
STE 900				
City	State	Zip Code	ļ	19276.50
ARLINGTON	VA	22206		ransaction ID : SE24.571 te of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ught: X House District: 03
NUNN, ZACH, , ,		Oppose		sident Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		402525.90	Disburser 2024	
	1 1			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		•	43486.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		• F	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
CORED CHDIS			M - M	/ D.D. / Y.Y.Y.Y
GOBER, CHRIS, , , Signature		Date	10	10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 198 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C coorser
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ D D / Y D Y D
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
THE LUKENS COMPANY				10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD			Amou	ınt
STE 900	Ctoto	Zin Codo		19276.50
City ARLINGTON	State VA	Zip Code 22206	Tran	saction ID : SE24.572
	VA	22200		of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 10 / 2024
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 03
BACCAM, LANON, , ,		Support Oppose	Presid	ΙΔ
Calendar Year-To-Date Per Election for Office Sought		402525.90	Disburseme	nt For: Primary X General
Tot Election for Office Godgitt	7 7			Other (specify)
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Date	of Public Distribution/Dissemination
			[10 09 7 2024
Mailing Address 2800 SHIRLINGTON ROAD			Amou	unt
STE 900				47050 50
City ARLINGTON	State	Zip Code	Tran	17056.50 saction ID : SE24.573
	VA	22206	I	of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M 10
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 02
THERIAULT, AUSTIN, , ,		Oppose	Presic	ME
Calendar Year-To-Date			Disburseme	nt For: Primary X General
Per Election for Office Sought	7	772683.43	2024	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	36333.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		-	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,		Doto	M M /	10 / 2024
Signature		_ Date	, 10	2327

TEMIZED INDEPENDENT EXPENDITURES				PAGE 199 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			E1	EC IDENTIFICATION NUMBER ▼
America PAC				
				C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	/ D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Date of I	Public Distribution/Dissemination
			10	09 / 2024
Mailing Address 2800 SHIRLINGTON ROAD			Amount	
STE 900	04-4-	7:- 0-1-		47056 50
City	State	Zip Code	Troposa	17056.50
ARLINGTON	VA	22206	I	tion ID : SE24.574 Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	M 10	
Name of Federal Candidate:		Support	Office Sought:	House District:02
GOLDEN, JARED, , ,		Oppose	President	ME
		Z	Disbursement F	
Calendar Year-To-Date Per Election for Office Sought	, , ,	772683.43	2024	er (specify)
Full Name of Payee		Memo	Item Date of F	Public Distribution/Dissemination
THE LUKENS COMPANY			M	
Mailing Address			10	09 2024
2800 SHIRLINGTON ROAD			Amount	
STE 900	State	Zip Code		27747.50
ARLINGTON	VA	22206	Transac	tion ID : SE24.575 Disbursement or Obligation
Purpose of Expenditure		Category/	M	M / D D / Y Y Y
PRINTING/POSTAGE		Type	10	10 2024
Name of Federal Candidate:		Support	Office Sought:	House District:07
ALTMAN, SUE, , ,		Oppose	President	
Calendar Year-To-Date			Disbursement F	for: Primary X General
Per Election for Office Sought	7 7	762074.77	2024 Othe	er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;		•	44804.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	7
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Expenditures			•	7 7 7
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date		10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 200 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 / 09 / 2024
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900		1		
City	State	Zip Code		27747.50
ARLINGTON	VA	22206		Transaction ID : SE24.576 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/		10 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		10 10 2024
Name of Federal Candidate:		Support	Office	Sought: X House District:07
KEAN, TOM, , ,		Oppose		President Senate State: NJ
Calendar Year-To-Date		700074 77	1	sement For: Primary X General
Per Election for Office Sought	7-1-1-7-	762074.77	2024	Other (specify) ▶
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				10 09 2024
STE 900				Amount
City	State	Zip Code		18874.50
ARLINGTON	VA	22206		Transaction ID : SE24.577
Purpose of Expenditure		Category/	_	Date of Disbursement or Obligation
PRINTING/POSTAGE		Type		10 / 2024
Name of Federal Candidate:		X Support	Office	Sought: House District:09
MERRIN, DERRICK, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date		832697.30		sement For: Primary X General
Per Election for Office Sought	7 7	002007.00	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	46622.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	1 1 1 1 1 1 1 1 1 1 1 1 1
(a) TOTAL landers and set Formandifferen				
(c) TOTAL Independent Expenditures				7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CORED CHRIS			M	M / D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 10	10 2024

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 201 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				'
America PAC				FEC IDENTIFICATION NUMBER ▼ C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900	State	Zip Code		18874.50
ARLINGTON	VA	22206		Transaction ID : SE24.578 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 10 / 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 09
KAPTUR, MARCY, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 7	832697.30	Disbu 2024	ursement For: ☐ Primary ☐ General ☐ Other (specify) ▶
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900				Amount
City ARLINGTON	State VA	Zip Code 22206		21620.00 Transaction ID : SE24.579 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 10 / 2024
Name of Federal Candidate: COUGHLIN, KEVIN, , ,		Support Oppose	Office	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1033567.73	Disbu 2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. •	40494.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	e 1	0 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Date

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 202 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed or	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item C	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				
STE 900			A	mount
City	State	Zip Code		21620.00
ARLINGTON	VA	22206		Fransaction ID : SE24.580 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 10 Congation 2024
Name of Federal Candidate:		Support	Office S	Sought: X House District: 13
SYKES, EMILIA, , ,		∑ Oppose		resident Senate State: OH
		Z oppose		ement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	, , ,	1033567.73	2024	Other (specify) >
Full Name of Payee		☐ Memo	Item C	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				
STE 900			Α	mount
City	State	Zip Code		13321.00
ARLINGTON	VA	22206		Transaction ID : SE24.581
Purpose of Expenditure		Category/	7	Oate of Disbursement or Obligation
PRINTING/POSTAGE		Type		10 10 2024
Name of Federal Candidate:		Support	Office S	Sought: X House District:03
KENT, JOE, , ,		Oppose		resident Senate State: WA
Calendar Year-To-Date				ement For: Primary X General
Per Election for Office Sought	7	635211.89	2024	Other (specify)
	,		L	Other (specify)
(a) SUPTOTAL of Itomized Independent Expanditures			. г	34941.00
(a) SUBTOTAL of Itemized Independent Expenditures	·			34941.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ires		. [
(a) GOD TO THE OF OFFICE HISTORIA EXPONENT				
(c) TOTAL Independent Expenditures			[
`,			_	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M	10 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 203 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
THE LUKENS COMPANY			М	10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				
STE 900			Amour	nt
City	State	Zip Code	─ [:	13321.00
ARLINGTON	VA	22206		action ID : SE24.582
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		of Disbursement or Obligation
Name of Federal Candidate:		Current	Office Court	t. Villauga Diatriot. 03
GLUESENKAMP PEREZ, MARIE, , ,		Support Oppose	Office Sough	t. House District.
, ,,,,		X Oppose	Preside	ent Senate State.
Calendar Year-To-Date Per Election for Office Sought	7	635211.89	Disbursemen 2024 O	t For:
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
THE LUKENS COMPANY			M	10 / Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				10 11 2024
STE 900			Amour	nt
City	State	Zip Code	— Г:	5851.60
ARLINGTON	VA	22206	Trans	saction ID : SE24.609 of Disbursement or Obligation
Purpose of Expenditure		Category/	M	10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING		Type	_	10 11 2324
Name of Federal Candidate:		X Support	Office Sough	t: X House District: 22
VALADAO, DAVID, , ,		Oppose	Preside	ent Senate State: <u>CA</u>
Calendar Year-To-Date			Disbursemen	t For: Primary X General
Per Election for Office Sought	7-1-1-7	809994.44	2024	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		-	19172.60
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. —	
()				7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = M /	10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITORES				PAGE 204 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900	Otata	Zin Codo		5851.60
City ARLINGTON	State VA	Zip Code 22206		Transaction ID : SE24.610
Purpose of Expenditure PRINTING		Category/ Type		Date of Disbursement or Obligation 10 11 2024
Name of Federal Candidate:			011	Courabate VIII.
SALAS, RUDY, , ,		Support Oppose		Sought: House District: 22 President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	, , ,	809994.44	Disburs 2024	sement For: Primary X General Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 11 2024
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900				
City ARLINGTON	State VA	Zip Code 22206		7531.50 Transaction ID : SE24.611 Pote of Dishurament or Obligation
Purpose of Expenditure		Category/	$\overline{}$	Date of Disbursement or Obligation
PRINTING		Type		10 11 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 41
CALVERT, KEN, , ,		Oppose	F	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	1 1 1 1	1277455.72	Disburs 2024	sement For: ☐ Primary ☐ General ☐ Other (specify) ▶
				Other (specify) P
(a) SUBTOTAL of Itemized Independent Expenditures				13383.10
				, , , , , ,
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,			M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 10	11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 205 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	"M / D "D / Y "Y "Y "Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			Amou	لىنىا لىا لى
STE 900	1 2: :	7. 0.1.		7524 50
City ARLINGTON	State VA	Zip Code 22206		7531.50 saction ID : SE24.612 of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 11 2024
Name of Federal Candidate:		Support	Office Sough	nt: X House District: 41
ROLLINS, WILL, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought		1277455.72	Disbursemer 2024	nt For:
Full Name of Payee THE LUKENS COMPANY		☐ Memo		of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900			Amou	nt
City ARLINGTON	State VA	Zip Code 22206		6926.50 saction ID : SE24.613 of Disbursement or Obligation
Purpose of Expenditure PRINTING	1	Category/ Type		10 11 2024
Name of Federal Candidate: STEEL, MICHELLE, , ,		Support Oppose	Office Sough	C^
Calendar Year-To-Date Per Election for Office Sought	7 1 7	1074401.97	Disbursemer 2024	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures			· [14458.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		.	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	10	11 2024

ITEMIZED INDEPENDENT EXPENDITURES PAGE 206 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee THE LUKENS COMPANY 11 2024 Mailing Address 2800 SHIRLINGTON ROAD Amount **STE 900** City State Zip Code 6926.50 **ARLINGTON** VA 22206 Transaction ID: SE24.614 Date of Disbursement or Obligation Purpose of Expenditure Category/ **PRINTING** 2024 Type Name of Federal Candidate: 45 Support Office Sought: X House District: TRAN, DEREK, , , CA Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 1074401.97 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item THE LUKENS COMPANY 2024 11 Mailing Address 2800 SHIRLINGTON ROAD Amount STE 900 2878.50 City State Zip Code Transaction ID: SE24.615 **ARLINGTON** V۸ 22206 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 11 **PRINTING** Type Name of Federal Candidate: 03 X Support X House Office Sought: District: NUNN, ZACH, , , IΑ Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 402525.90 2024 Per Election for Office Sought Other (specify) ▶ 9805.00 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 10 11 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 207 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	"M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Date o	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			Amou	nt
STE 900	04-4-	7:- 0		2878.50
City ARLINGTON	State VA	Zip Code 22206		action ID : SE24.616 of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 11 2024
Name of Federal Candidate:		Support	Office Sough	nt: X House District:03
BACCAM, LANON, , ,		∑ Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought		402525.90	Disbursement 2024 C	nt For:
Full Name of Payee THE LUKENS COMPANY		☐ Memo		of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900		_	Amou	nt
City ARLINGTON	State VA	Zip Code 22206		7031.00 saction ID : SE24.617 of Disbursement or Obligation
Purpose of Expenditure PRINTING	1	Category/ Type		10 / 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: KEAN, TOM, , ,		Support Oppose	Office Sough	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	762074.77	Disbursemen 2024	nt For: ☐ Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		· [:	9909.50
(b) SUBTOTAL of Unitemized Independent Expenditure	res		• .	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		_ Date	10	11 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 208 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900				, undust
City	State	Zip Code		7031.00
ARLINGTON	VA	22206		Transaction ID: SE24.618 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 11 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 07
ALTMAN, SUE, , ,		Oppose		President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought	7 7	762074.77	Disbur 2024	sement For:
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900				10 11 2024 Amount
City ARLINGTON	State VA	Zip Code 22206		6851.50 Transaction ID : SE24.619 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 / 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District: 09
MERRIN, DERRICK, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 7	832697.30	Disbur 2024	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures			·	13882.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
CODED CHDIS			M =	M / D D / Y Y Y Y
GOBER, CHRIS, , ,		_ Date	10	11 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 209 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Itom	Date of Public Distribution/Dissemination
THE LUKENS COMPANY		□ Memo	item	10 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900	Ctoto	Zin Codo		6851.50
City ARLINGTON	State VA	Zip Code 22206		Transaction ID : SE24.620
Purpose of Expenditure				Date of Disbursement or Obligation
PRINTING		Category/ Type		10 / 11 / 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District: 09
KAPTUR, MARCY, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		832697.30	Disbu 2024	rrsement For: Primary X General
Fer Election for Office Sought	7 7		2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				American
STE 900				Amount
City	State	Zip Code		6851.41
ARLINGTON	VA	22206		Transaction ID : SE24.621 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought:
COUGHLIN, KEVIN, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date			Disbu	rsement For: Primary X General
Per Election for Office Sought	7	1033567.73	2024	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				13702.91
			•	
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
CODED CHRIS			М	M / D D / Y Y Y Y
GOBER, CHRIS, , , Signature		_ Date	e 1	0 11 2024

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TEMIZED INDEPENDENT EXPENDITURES	•			PAGE 210 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				10 11 2024
STE 900				Amount
City	State	Zip Code		6851.41
ARLINGTON	VA	22206		Transaction ID : SE24.622 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING		Category/ Type		10 / 11 / 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 13
SYKES, EMILIA, , ,		X Oppose		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1033567.73	Disbur 2024	sement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 11 2024
Mailing Address 2800 SHIRLINGTON ROAD				Assessed
STE 900				Amount
City	State	Zip Code		4669.00
ARLINGTON	VA	22206		Transaction ID : SE24.623 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		10 11 2024
PRINTING		Type		
Name of Federal Candidate:		Support	Office	Sought: House District: 03
KENT, JOE, , ,		Oppose		President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	7 7	635211.89	Disbur 2024	sement For: Primary
•				
(a) SUBTOTAL of Itemized Independent Expenditures	S		• •	11520.41
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

 $GOBER,\ CHRIS,\ ,\ ,$

Signature

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES				PAGE 211 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
America PAC				
				C C00879510
Check if 24-hour report 48-hour report	New re	port Amends repo	ort filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				
STE 900				Amount
City	State	Zip Code		4669.00
ARLINGTON	VA	22206		Transaction ID : SE24.624 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	-	M M / D D / Y Y Y Y
PRINTING		Type	_	10 11 2024
Name of Federal Candidate:		Support	Office	e Sought: X House District:03
GLUESENKAMP PEREZ, MARIE, , ,		Oppose		President Senate State: WA
Calendar Year-To-Date			Disbu	ursement For: Primary X General
Per Election for Office Sought	7 7	635211.89	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				10 14 2024
STE 900				Amount
City	State	Zip Code		19348.50
ARLINGTON	VA	22206		Transaction ID : SE24.697 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	$\overline{}$	M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		10 15 2024
Name of Federal Candidate:		Support	Office	e Sought: House District: 45
STEEL, MICHELLE, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date		1071101 07	Disbu	ursement For: Primary X General
Per Election for Office Sought	7	1074401.97	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		. •	24017.50
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. •	
(c) TOTAL Independent Expenditures			. •	
Under penalty of perjury I certify that the independent				
with, or at the request or suggestion of, any candidate party committee) any political party committee or its		a committee or agent	oi eitne	e, or the reporting entity is not a political

2024

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Date

301123022 2 (1 20 1 01111 0x)				
TEMIZED INDEPENDENT EXPENDITURES	3			PAGE 212 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				10 14 2024
STE 900				Amount
City	State	Zip Code		19348.50
ARLINGTON	VA	22206		Transaction ID : SE24.698 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 / D D / Y Y Y Y Y Y 2024
Name of Federal Candidate:		Support	Office	Sought: House District: 45
TRAN, DEREK, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 7	1074401.97	Disbu 2024	rsement For: Primary
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 14 2024
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900				
City	State	Zip Code		13484.00
ARLINGTON	VA	22206		Transaction ID: SE24.653 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
PRINTING/POSTAGE		Type		10 15 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 22
VALADAO, DAVID, , ,		Oppose		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	809994.44	Disbu 2024	rsement For: Primary
<u>'</u>				
(a) SUBTOTAL of Itemized Independent Expenditure	S		•	32832.50
(b) SUBTOTAL of Unitemized Independent Expenditu	ures		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or its	late or authorized			
GOBER, CHRIS, , ,		Date	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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TE	EMIZED INDEPENDENT EXPENDITURES	3			PAGE 213 OF 224
N/	AME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
	America PAC				
′	unerica i 710				C C00879510
Cł	heck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed c	on M = M / D = D / Y = Y = Y
	Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
	THE LUKENS COMPANY				10 14 Y 2024
	Mailing Address 2800 SHIRLINGTON ROAD				Aurana
	STE 900				Amount
	City	State	Zip Code		13484.00
	ARLINGTON	VA	22206		Transaction ID : SE24.654 Date of Disbursement or Obligation
	Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Federal Candidate:		Support	Office	Sought: X House District: 22
	SALAS, RUDY, , ,		Oppose		President Senate State: CA
	Calendar Year-To-Date Per Election for Office Sought	7	809994.44	Disburs 2024	sement For:
	Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
	THE LUKENS COMPANY				10 14 2024
	Mailing Address 2800 SHIRLINGTON ROAD				10 14 2024
	STE 900				Amount
	City	State	Zip Code		21603.75
	ARLINGTON	VA	22206		Transaction ID : SE24.655 Date of Disbursement or Obligation
	Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
	PRINTING/POSTAGE		Type		10 15 2024
	Name of Federal Candidate:		X Support	Office	Sought: X House District: 41
	CALVERT, KEN, , ,		Oppose		President Senate State: CA
	Calendar Year-To-Date Per Election for Office Sought	1	1277455.72	Disburs 2024	sement For: ☐ Primary ☐ General ☐ Other (specify) ►
	(a) SUBTOTAL of Itemized Independent Expenditure	;S		. •	35087.75
	(b) SUBTOTAL of Unitemized Independent Expenditu	ures			
	(c) TOTAL Independent Expenditures			•	
	Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	date or authorized			
	GOBER, CHRIS, , ,		Date	M = 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES				PAGE 214 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 300073310
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	n M M / D D / Y Y Y Y Y
Full Name of Payee		Memo	Item I	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				M 10 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900		1		
City	State	Zip Code		21603.75
ARLINGTON	VA	22206		Transaction ID : SE24.656 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10
Name of Federal Candidate:		Support	Office :	Sought: X House District: 41
ROLLINS, WILL, , ,		✓ Oppose		President Senate State: CA
0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1				sement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	7	1277455.72	2024	Other (specify)
Full Name of Payee		☐ Memo	Item I	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				M M / D D / Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				10 14 2024
STE 900			1	Amount
City	State	Zip Code		19350.00
ARLINGTON	VA	22206		Transaction ID : SE24.657 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PRINTING/POSTAGE		Type		10 10 2024
Name of Federal Candidate:		X Support	Office S	Sought: House District: 45
STEEL, MICHELLE, , ,		Oppose	F	President Senate State: CA
Calendar Year-To-Date		4074404 07	1	sement For: Primary X General
Per Election for Office Sought	7-1-1-7-	1074401.97	2024	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				40953.75
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,			M = N	/
Signature		_ Date	e 10	15 2024

TEMIZED INDEPENDENT EXPENDITURES					PAGE 2	15 OF 224 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FFC I		TION NUMBER ▼
America PAC				C	C0087951	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M	D D /	Y Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item D	ate of Publ	ic Distributio	n/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			A	mount		
STE 900						1.00.000
City ARLINGTON	State VA	Zip Code 22206			ID : SE24.6	
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M M M	ursement or	/ Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: TRAN, DEREK, , ,		Support Oppose	Office S	ought: [X House Senate	District: 45 State: CA
Calendar Year-To-Date Per Election for Office Sought	7 7	1074401.97		ement For: Other (s	Prima	
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item D	ate of Publ	ic Distributio	n/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900			A	mount		
City ARLINGTON	State VA	Zip Code 22206	I		ID : SE24.6 ursement or	
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10	15	2024
Name of Federal Candidate: NUNN, ZACH, , ,		Support Oppose	Office S	ought: [X House Senate	District:03 State:IA
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	402525.90	Disburse 2024	ement For: Other (s	Prima	ry X General
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			• [• [7	7	36551.30
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidar party committee) any political party committee or its a	te or authorized					
GOBER, CHRIS, , ,		5 .	M = M	/ DID		024
Cignoture		_ Date	10	15		UL-7

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 216 OF 224 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ America PAC C00879510 Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution/Dissemination Full Name of Payee THE LUKENS COMPANY 14 2024 Mailing Address 2800 SHIRLINGTON ROAD Amount **STE 900** City State Zip Code 17201.30 **ARLINGTON** VA 22206 Transaction ID: SE24.660 Date of Disbursement or Obligation Purpose of Expenditure Category/ PRINTING/POSTAGE 2024 Type 03 Name of Federal Candidate: Support Office Sought: X House District: BACCAM, LANON, , , IΑ Oppose President State: Senate Primary X General Disbursement For: Calendar Year-To-Date 402525.90 2024 Per Election for Office Sought Other (specify) ▶ Date of Public Distribution/Dissemination Full Name of Payee Memo Item THE LUKENS COMPANY 2024 14 Mailing Address 2800 SHIRLINGTON ROAD Amount **STE 900** 15220.00 City State Zip Code Transaction ID: SE24.661 **ARLINGTON** V۸ 22206 Date of Disbursement or Obligation Purpose of Expenditure Category/ 2024 PRINTING/POSTAGE Type Name of Federal Candidate: 02 X Support X House Office Sought: District: THERIAULT, AUSTIN, , , ME Oppose President Senate State: X General Disbursement For: Primary Calendar Year-To-Date 772683.43 2024 Per Election for Office Sought Other (specify) ▶ 32421.30 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. GOBER, CHRIS, , , 2024 15 10 Date

TEMIZED INDEPENDENT EXPENDITURES					PAGE 21	7 OF 224 24 OF FORM 3X
NAME OF COMMITTEE (In Full)						TION NUMBER ▼
America PAC				C	C0087951	
Check if 24-hour report 48-hour report	New repo	ort Amends repor	t filed on	M = M /	D D /	YYYY
Full Name of Payee THE LUKENS COMPANY		☐ Memo I	tem Date	of Public	Distributio	n/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			Amo	ount		
STE 900		1				1.2.2.2.2
City ARLINGTON	State VA	Zip Code 22206			D: SE24.60	
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type	Date	10 10	15	/ Y Y Y Y Y Y Y 2024
Name of Federal Candidate: GOLDEN, JARED, , ,		Support Oppose	Office Sou	ght: >	House Senate	District:02 State:ME
Calendar Year-To-Date Per Election for Office Sought	· · · · ·		Disbursem 2024		Prima	
Full Name of Payee THE LUKENS COMPANY		☐ Memo I	tem Date	of Public	Distributio	n/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900			Amo	ount		
City ARLINGTON	State VA	Zip Code 22206			D : SE24.6	
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M 10 /	15	2024
Name of Federal Candidate: KEAN, TOM, , ,		Support Oppose	Office Sou	ght:	K House Senate	District:07 State:NJ
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	762074.77	Disbursem 2024	ent For: Other (sp	Prima	ry X General
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure			• [1 7	7	39980.00
(c) TOTAL Independent Expenditures			•			
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	te or authorized	•				
GOBER, CHRIS, , ,			M = M	/ D D		Y Y Y
Cignoture		Date	10	15	20)24

TEMIZED INDEPENDENT EXPENDITURES				PAGE 218 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	"M / D "D / Y "Y "Y "Y
Cristic II 24 flour report	Now Top	7 mende repe		
Full Name of Payee THE LUKENS COMPANY		☐ Memo		of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD			─ . └	10 14 2024
STE 900			Amou	nt
City	State	Zip Code	─ I :	24760.00
ARLINGTON	VA	22206		saction ID : SE24.664 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 15 2024
Name of Federal Candidate:		Support	Office Sough	nt: X House District:07
ALTMAN, SUE, , ,		Oppose	Preside	NI
Calendar Year-To-Date Per Election for Office Sought	7	762074.77	Disbursemen	nt For: Primary X General Other (specify) ▶
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD STE 900			Amou	
City	State	Zip Code		16842.00
ARLINGTON	VA	22206	Trans	saction ID : SE24.665 of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sough	nt: X House District:09
MERRIN, DERRICK, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7	832697.30	Disbursemen 2024 C	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu				41602.00
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	10	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

GOBER, CHRIS, , ,

Signature

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SCHEDULE E (FEC Form 3X)						
TEMIZED INDEPENDENT EXPENDITURES				PAGE 219 OF 224		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X		
America PAC				FEC IDENTIFICATION NUMBER ▼		
America i Ae				C C00879510		
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed on	M M / D D / Y Y Y Y		
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Dat	e of Public Distribution/Dissemination		
Mailing Address 2800 SHIRLINGTON ROAD			A			
STE 900			Am	ount		
City	State	Zip Code		16842.00		
ARLINGTON	VA	22206		nsaction ID : SE24.666 e of Disbursement or Obligation		
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		Support	Office Sou	ıght: X House District: 09		
KAPTUR, MARCY, , ,		Oppose	Pres	sident Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	832697.30	Disbursem 2024	nent For: ☐ Primary ☒ General Other (specify) ▶		
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination		
THE LUKENS COMPANY				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 2800 SHIRLINGTON ROAD			Δ			
STE 900			Am	ount		
City	State	Zip Code		19292.00		
ARLINGTON	VA	22206		ansaction ID : SE24.667 e of Disbursement or Obligation		
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 15 / Y Y Y Y Y Y		
Name of Federal Candidate:		N 0	0111	ught: V House District: 13		
COUGHLIN, KEVIN, , ,		Support Oppose	Office Sou	ght: House District: 13 Sident Senate State: OH		
Calendar Year-To-Date		1033567.73	Disbursem			
Per Election for Office Sought	7 7	100001.10	2024	Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures						
(h) CURTOTAL of United sized by department from an dist						
(b) SUBTOTAL of Unitemized Independent Expenditures			• •			
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						

2024

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Date

TEMIZED INDEPENDENT EXPENDITURES				PAGE 220 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
				C 000/3310
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 2800 SHIRLINGTON ROAD				10 14 2024
STE 900			Amo	ount
City	State	Zip Code		19292.00
ARLINGTON	VA	22206		nsaction ID : SE24.668 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 15 / 2024
Name of Federal Candidate:		Support	Office Sou	ight: House District: 13
SYKES, EMILIA, , ,		Oppose	l —	sident Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 7	1033567.73	Disbursem 2024	
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination
THE LUKENS COMPANY				M M / D D / Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				10 14 2024
STE 900			Amo	ount
City	State	Zip Code		11887.00
ARLINGTON	VA	22206		ensaction ID : SE24.669 e of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ight: X House District:03
KENT, JOE, , ,		Oppose	Pres	sident Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	7	635211.89	Disbursem 2024	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures				31179.00
(a) 300101AE of Romizod mooperacity Experiation	,			01116.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M M M	15 2024

TEMIZED INDEPENDENT EXPENDITURES				PAGE 221 OF 224 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				10 14 2024
Mailing Address 2800 SHIRLINGTON ROAD STE 900				Amount
City	State	Zip Code		11887.00
ARLINGTON	VA	22206		Transaction ID : SE24.670 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		M 10 / 15 / 2024
Name of Federal Candidate:		Support	Office	Sought: X House District: 03
GLUESENKAMP PEREZ, MARIE, , ,		Oppose		President Senate State: WA
Calendar Year-To-Date		005044.00		rsement For: Primary X General
Per Election for Office Sought	7 7	635211.89	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE LUKENS COMPANY				10 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900				Allount
City	State	Zip Code		133530.00
ARLINGTON	VA	22206		Transaction ID : SE24.720 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	l	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbu 2024	rsement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				145417.00
(,,				
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
GOBER, CHRIS, , ,			M	M / D D / Y Y Y Y Y
Signature		_ Date	e 10	15 2024

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TEMIZED INDEPENDENT EXPENDITURES				PAGE 222 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
America PAC				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	n M M / D D / Y Y Y Y
Full Name of Payee THE LUKENS COMPANY		☐ Memo	Item [Date of Public Distribution/Dissemination
				10 D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 SHIRLINGTON ROAD				Amount
STE 900				
City	State	Zip Code		133530.00
ARLINGTON	VA	22206		Transaction ID : SE24.721 Date of Disbursement or Obligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type		10 16 7 2024
Name of Federal Candidate:		Support	Office S	Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date		VE 45 770 4 00	I	sement For: Primary X General
Per Election for Office Sought	10	5457794.82	2024	Other (specify) ▶
Full Name of Payee		☐ Memo	Item [Date of Public Distribution/Dissemination
THE SYNAPSE GROUP LLC				10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1309 COFFEEN AVE				
STE 1200			'	Amount
City	State	Zip Code		467500.00
SHERIDAN	WY	82801	I .	Transaction ID : SE24.494 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 04 2024
Name of Federal Candidate:		X Support	Office S	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X F	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disburs	sement For: Primary X General
Tel Election for Office Sought	7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	í			601030.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	, ,
(c) TOTAL Independent Expenditures			[
•			- [7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Date	M = N	16 2024

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 223 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M = M / D = D / Y = Y = Y
Full Name of Payee THE SYNAPSE GROUP LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1309 COFFEEN AVE				10 02 2024
STE 1200				Amount
City	State	Zip Code		467500.00
SHERIDAN	WY	82801		Transaction ID : SE24.495 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS		Category/ Type		10 04 7 2024
Name of Federal Candidate:		Support	Office	e Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbu 2024	orsement For: Primary X General Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
THE SYNAPSE GROUP LLC				M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address 1309 COFFEEN AVE				Amount
STE 1200	Ctata	Zin Codo		467500.00
City SHERIDAN	State WY	Zip Code 82801		Transaction ID : SE24.718 Date of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
CANVASSING/FIELD OPERATIONS		Type		10 15 2024
Name of Federal Candidate:		X Support	Office	Sought: House District: 00
TRUMP, DONALD, , ,		Oppose	X	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	5457794.82	Disbu 2024	ursement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	935000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
GOBER, CHRIS, , ,		Data	M 1	0 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

 $GOBER,\ CHRIS,\ ,\ ,$

Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 224 OF 224
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
` '				FEC IDENTIFICATION NUMBER ▼
America PAC				C C00879510
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee THE SYNAPSE GROUP LLC		☐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address 1309 COFFEEN AVE STE 1200				Amount
City	State	Zip Code		467500.00
SHERIDAN	WY	82801		Transaction ID : SE24.719 Date of Disbursement or Obligation
Purpose of Expenditure CANVASSING/FIELD OPERATIONS	Calegory/			10 15 / Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought: House District: 00
HARRIS, KAMALA, , ,		Oppose		President Senate State:
Calendar Year-To-Date Per Election for Office Sought	10	05457794.82	Disbu 2024	ursement For:
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination
				M M / D D / Y Y Y Y
Mailing Address				Amount
City	State	Zip Code		
				Date of Disbursement or Obligation
Purpose of Expenditure		Category/ Type		M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support Oppose	Office	e Sought: House District: President Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 7		Disbu	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures			,	467500.00
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(c) TOTAL Independent Expenditures			•	44896018.94
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			

2024

15

10

Date